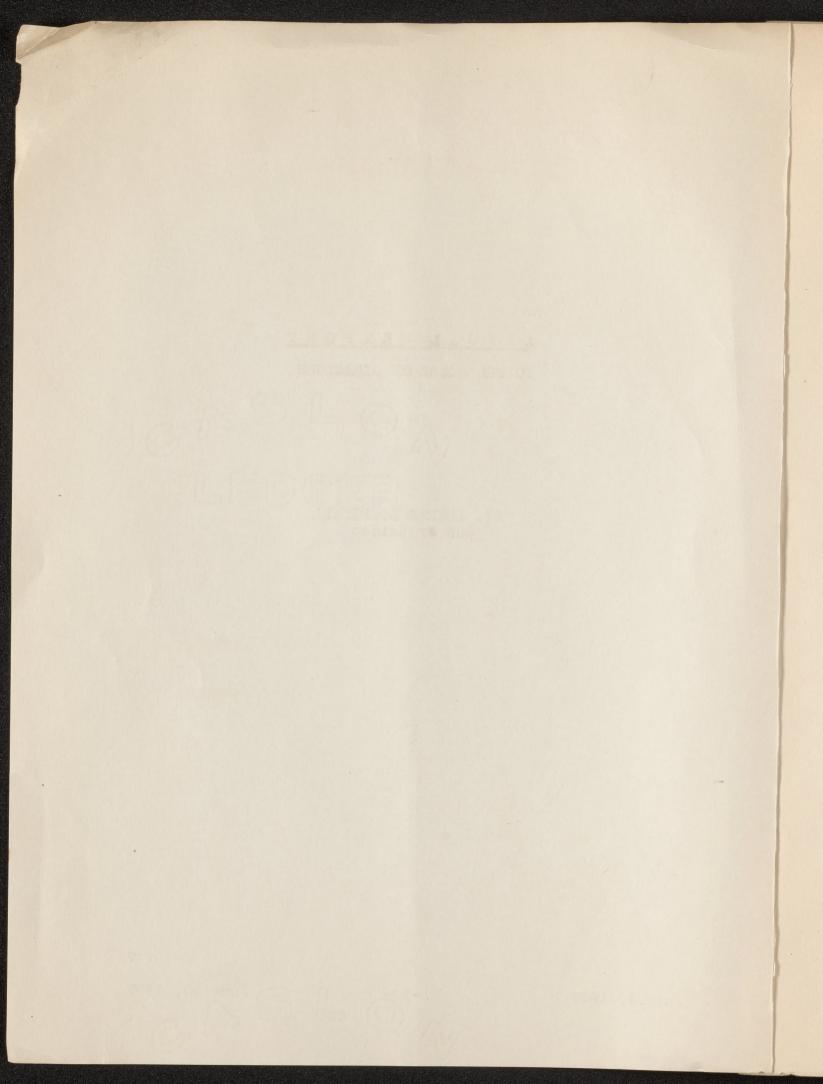
californis. MINENSITY OF CALIFORNIA ANNUAL REPORT TO THE BOARD OF DIRECTORS ST. LUKE'S HOSPITAL San Francisco June 30, 1937 July 1, 1936 -to-



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STAFF

Alanson Weeks, M.D., Chief of Staff

M E D I C I N E

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A. E. Edgerton, M.D.

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M. H. Hosmer, M.D., Consultant

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W. H. Hill, M.D.
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Philip Arnot, M.D.
R. Glenn Craig, M.D.
E. F. Anderson, M.D.

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Charles C. Fulmer, M.D.

PHYSIOTHERAPY Charles C. Fulmer, M.D.

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Clare Malone, M.D.
W. L. Thomson, M.D.
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M. G. DENTAL SURGERY
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DeWitt K. Burnham, M.D.

William Kenney, M.D.

L. B. Coblentz, M.D., Chief Out-

PATHOLOGY

W. P. Stowe, M.D., Chief d. Y. Husk, M.D., Consultant Dr. Kerl F. Meyer, Consultent

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Alanson Weeks, M.D., Chief G. D. Delpret, M. P., Surgical

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Albert D. Davis, M.D.

Dudley Smith, M.D. . . James W. Morgan, M.D.

G. J. McChesney, M.D. R. L. Dresel, M.D. Wilbur J. Cox, M.D.

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> H. E. Muggles, M.D. Charles C. Fulmer, M.D.

> > Charles C. Fulmer, M.D.

Walter Lawrence, M.D. .

M. G. Karlace, D.D.S.

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ASSISTANT RESIDENT PHYSICIANS

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Charles C. Caulkins, M.D.
Porter S. Cannon, M.D.
William S. Huckvale, M.D.
Eldor C. Sailer, M.D.
Jack C. Sleath, M.D.

INTERNS

Robert L. Ayers, M.D.
Lawrence A. Solberg, M.D.
Danson M. Tarr, M.D.
Thomas Myron Torgerson, M.D.

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Villiam S. Injervale, M.D.
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Jakk C. Dlessn, M.D.

SHRIVE

Robert L. Ayers, M.D. Lawrence L. Solberg, M.D. Denson M. Terr, M.D. Thomas Myron Torgerson, M.D. To the Members of the Corporation of ST. LUKE'S HOSPITAL

The past fiscal year was one of rising costs of materials and increased wages throughout the country. This affected hospitals as well as all industry. Also, a new State requirement for a three-year training course for nurses increased the nursing cost and will further increase it during the current fiscal year. This is dwelt on at considerable length in Dr. Johnson's and Miss Kennedy's Reports to which you are referred. These increased expenses resulted in reducing our net earnings and consequently we were able to do less free work.

The number of patients treated during the year ended June 30, 1937, exclusive of infants, was 5417 as against 5136 the previous fiscal year; the daily average number of patients was 160.4, or 80% of capacity -- customarily considered as "full" capacity -- compared with 154.03, or 77% of capacity the previous year; and the total number of days treatment furnished was 58,574 as compared with 56,223 the previous year.

The free and part-pay work during the year amounted to \$64,435, or a decrease of \$6840 from that of the previous year, due to decreased profits to spend on free hospitalization. Of this free work, \$18,975 was paid for by the Community Chest, a decrease of about \$350 from the previous year; \$18,633 by our Endowments, an increase of almost \$3800 over the previous year; \$9300 by the Katharine and Harry Babcock Fund, and \$7300 by the Fund dispensed by Dr. Weeks. The contribution made by the Staff during the year in professional service amounted to about \$42,000.

Donations and bequests increased our Endowment Fund by nearly \$26,000, bringing the total to a little over \$561,000. Of this \$26,000, something over \$4,000 was received as the final payment of a bequest from the Estate of Jessie D. Carr Seale and \$20,000 from the Estate of Mrs. Agnes M. Bourn.

A record of which all connected with St. Luke's may be proud is the fact that of 443 graduates taking the. State Board examination for Registration this year, twenty-five received an "A" grade, and of these, five were graduates of St. Luke's School of Nursing. Also, our Nurses Training School stood second in the State.

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For detailed information you are referred to Dr. Johnson's and Miss Kennedy's Reports, and to those of other heads of departments.

Since 1922 I have been president of St. Luke's Hospital. During these sixteen years, thanks to the efficient management of Dr. Johnson, to the devotion of our Medical Staff, to the splendid cooperation of our Board of Directors, and to the generosity of many benefactors, the Hospital has prospered. Our endowment funds have increased from \$90,000 to \$561,000. We have almost tripled the amount of free hospitalization furnished the community, and enhanced our reputation until St. Luke's is today one of the outstanding hospitals on the Pacific Coast. Also, our Nurses Training School has made an excellent record. During this period our School has graduated four hundred and seventy-five bedside nurses efficiently trained and, through Miss Kennedy's and the Chaplain's influence, imbued with the highest ethics of their profession.

We are now entering a new era. Due to changing conditions there are many problems to be met in the near future, as set forth in Dr. Johnson's Report, but I feel sure we can solve them wisely. It is time we had a new president to meet these new conditions.

In this, my last Annual Report, I want to remind you that St. Luke's Hospital is an adjunct of the Protestant Episcopal Church. As such I take it that one of St. Luke's functions is to efficiently train bedside nurses imbued with Christian ideals. It is through the Training School primarily that the Hospital can justify itself as a Church Institution.

From time to time in the past the suggestion has been made that we discontinue our Nurses Training School in order to save money. This proposal will undoubtedly be made again in the face of mounting costs. I sincerely hope that the Nurses Training School will never be discontinued except as a last resort. Without it we would have little use for a Chaplain, the Chapel might as well be turned into a ward, and St. Luke's would be a Church Hospital in name only. The Nurses Training School was very near to the heart of Mrs. Monteagle and many others to whom we are indebted for a large part of our plant and endowments, and we owe it to them, as well as to the Episcopal Church, to continue the School even if by so doing it shall be necessary to curtail somewhat our free work.

Pr. Johnson's and Miss Kommody's Reports, and to these of other heads of departments.

Since 1922 I have been prostaons of St. Inke's Hospital. During these sixteen years, themes to the sificient management of Dr. Johnson, to the devotion of our Medical Staff, to the splendid desparation of our Board of Directors, and to the generosity of many our Board of Directors, the Hospital has prospered. Our endowment tunds have increased from 980,000 to \$551,000. We have allowed the manual of free hospitalisation from 1800 to \$551,000.

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The President and Board of Directors St. Luke's Hospital San Francisco, California

Gentlemen:

I submit herewith my report as Treasurer of St. Luke's Hospital for the year ended June 30, 1937. The financial and operating statements which constitute this report are as follows:

Exhibit A--Statement of financial condition--June 30, 1937

Exhibit B--Statement of income and expense, year ended June 30, 1937

Schedule B-1--Statement of operating income and expense, year ended June 30,1937

Exhibit C--Statement of changes in endowment fund income accounts, year ended June 30, 1937

Exhibit D--Statement of changes in endowments, year ended June 30, 1937, and the disposition of endowment funds at June 30, 1937

Yours very truly,

P. G. Goode

Treasurer

The Fresident and Board of Directors. San Francisco, California of St. Luke's Hospital for the year ended June 30, 1937. . :awollor as ers froger eldf Exhibit A -- Statement of financial condition --Exhibit B -- Statement of income and expense, year ended June CO. 1987 Schedule B-1--Statement of operating income and expense, year ended June 50,1987 Enricht desStatement of changes in endownent fund intermed June 30, 1987 ended June 30, 1987 ent bis, vell 10 to themetate of their 20 and the the the the the the the the their the the the their thinds at the about the the their thinds at the thinds P. C. Goode

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| FINANCIAL CONDITIONJUNE 30, 19 | |
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| STATEMENT | |

| Exhibit A | 75,255.45 | 38,457.96 | 561,159,73 | 745,332.63 | 8,185,15 |
|---|---|--|--|---|--|
| NT OF FINANCIAL CONDITIONJUNE 30, 1937 ASSETS | Current Cash in banks and on hand Accounts receivable—patients and others. Less Reserve for doubtful accounts Miscellaneous accounts and note receivable Advances to employees for annuity premiums Inventories of hospital supplies Total current assets \$000000000000000000000000000000000000 | EMPLOYEES PENSION FUND: Securities—at cost Uninvested cash Total investments—employees' pension fund | ENDOWMENT FUNDS: Consolidated endowment funds: Investmentsat costexhibit C Lydia Paige Monteagle endowment funds: Investmentsat costless premium amortization Uninvested cash Total investmentsendowment funds \$2587.66 \$2587.60 \$258.662.13 | ildings and equipment ss: Reserve for depreciation Total fixed assets—net | DEFERRED CHARGES: Prepaid insurance premiums Prepaid annuity premiums Total deferred charges |
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| Exhibit A | \$ 21,620.77 | | 7,771,85 | 38,457.96 | 1 1,400,16 | 561,159,73 | 797,380,61 |
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| Accounts payable to trade creditors Accounts payable to doctors Accounts payable to doctors Patients credit balances Accrued sales tax Unclaimed monics in safekeeping | | Unexpended income from endowment funds-exhibit C \$5,806.07 Unexpended clinic and other funds Total unexpended funds | EMPLOYEES' PENSION FUND RESERVE: Earned pensions (March 51, 1937) Less: Excess of earned pensions over pension fund assets at June 30, 1937 | or v | Consolidated endowments-exhibit D Lydia Paige Monteagle endowments-exhibit D Total endowments | ty and equipment | Net income exhibit B 2,519.00 21,075.74 Total capital and surplus |

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OPERATING INCOME:

| | \$502,905.03 | 430,948,83 |
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| Income from hospitalization and other services | Schedule B-1 \$502,905.03 | Hospital operating expenses schedule B-1 |

| \$ 71,956.20 | | | 48,611.78 |
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| | DEDUCTIONS FOR RESERVES: | Provision for depreciation and obsolescence \$ 36,639.96 Provision for pension of employees 7,620.00 | Provision for doubtful accounts |
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EXPENSES PAID FROM OFFICE OF TREASURER:

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| \$ 14,800.04 | 5,963,09 | 530.70 | 93,83 |
| Salaries | Taxes | Automobile and travel expenseMedical Director | General expenses |

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STATEMENT OF OPERATING INCOME AND EXPENSE Year Ended June 30, 1937

| INCOME FROM CARE OF PATIENTS: Rooms and wards Operating room Drugs and dressings Meals and trays Delivery room Miscellaneous operating Telephone HOSPITAL OPERATING EXPENSES: Meals and trays General nursing Operating room Administrative salaries Janitorial services Drugs and dressings Maintenance of buildings and grounds Light, heat and power Medical and surgical Training school for nurses Laundry. Telephone Insurance General expense Storeroom and purchasing Linen room Miscellaneous operating expense Sales tax | 40,788.65 37,225.32 15,952.91 10,381.75 5,263.43 3,379.65 \$405,921.71 | |
|--|--|--|
| X-ray and lantern slides Laboratory Physiotherapy Deep-therapy Semi-special nursing Emergency room Radio Basal metabolism Electrocardiograph Canteen OTHER INCOME AND EXPENSES: Discounts earned Miscellaneous Commissions | 31,112.05 5,829.25 3,185.50 5,560.60 2,074.45 1,404.30 1,472.25 1,126.00 1,022.92 \$ 92,698.97 \$ 2,322.34 1,145.03 816.98 | 19,430.61 2,604.37 81.08 7,343.10 650.42 400.08 753.40 637.57 682.47 \$ 52,246.46 |
| TOTALSexhibit B | \$ 4,284.35 \$502,905.03 | \$ 1,063.41 \$430,948.83 |

STATEMENT OF OFFRATING INCOME AND EXPENSE Year saided June 30, 1937

| | t | product with the a national growth production of the product of th |
|---|--|--|
| Expense | Income 4898,930,00 40,788,65 87,285,32 10,581,75 5,263,43 8,379,65 | INCOME FROM CARE OF RATISHTS: Rooms and wards Derating room Menis and trays Delivery room Telephone HOSPITAL OPERATING MATERIES: |
| \$119,000.68 55,694.99 28,409.20 28,409.20 21,798.25 24,798.25 25,574.02 26,574.02 27,307.16 2,277.67 | | Heals and trays |
| 19,430,61 2,604,37 19,083,10 10,004,00,08 10,004,00,08 10,003,40 10,003,41 | 0.185.50 8.074.45 1.404.30 1.478.25 1.186.00 2.98.698.97 2.98.698.97 1.145.03 1.145.03 1.145.03 | AFECIAL DEPARTMENTS: Letoy and lantern slides Physiotherapy Semi-special nursing Semi-special nursing Andio Bhash metabolism Electrocardiograph Discounts ecrned Discounts ecrned TOTALS-exhibit B |
| | | ZEEFFIREFIELDES CONTROLLANDOS |

| Exhitit C Unexpended Balances June 30, | \$ 518.18 254.93* 157.82 799.10 170.39 374.44 528.37 601.17 101.05 230.98 90.22 192.40 227.80 227.12 357.80 | \$1,339.88 32.99 359.04 113.54 246.51 \$2,091.96 |
|---|--|--|
| Other | \$ 115.07*(1) 115.07*(1) 115.07(1) 490.29(2) 563.36(3) | \$6,745.30 |
| JUNE 50, 1957 Disbursements Income Added to Principal Di | 112.71 597.10 138.22 | \$848.05 (* Denotes |
| TEAR ENDED J | \$ 845.00 2,399.15 229.50 822.78 1,240.00 1,428.95 66.50 295.25 | \$7,500.07 1,568.65 1,082.25 652.41 492.05 \$11,295.43 |
| ND INCOME ACCOUNTS, YEAR ENDED Unexpended Balances Hospital-June 50, Income ization | \$ 938.71 1,990.70 261.56 461.49 1,006.87 1,056.90 972.00 208.72 112.71 597.10 115.07 138.22 575.44 549.23 90.22 192.40 522.37 575.44 | \$ 7,139.23 1,154.55 1,153.80 562.28 562.28 \$10,571.92 \$26,122.38 Bed Fund etc. |
| UND INCOME Unexpended Balances June 30, | (A) (A) (B) (B) (B) (B) (B) (B) (B) (B) (B) (B | \$1,700.72 447.09 287.49 203.67 176.50 \$2,815.47 \$6,230.75 ps Kip and Nichols vements, repairs, |
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STATEMENT OF CHANGES IN ENDOWMENTS, YEAR ENDED JUNE 30, 1937 AND THE DISPOSITION OF ENDOWMENT FUNDS JUNE 30, 1937

| \$519,154.54 10,443.83 \$529,598.37 | | | | \$1,561.36 | \$556,426.18 4,733.55 \$561,159.73 |
|---|--|--|---|-------------------------------|---|
| | \$25,827.51 | 848.03 | 4,886.02 | | |
| STATUS OF ENDOWMENT FUNDS AT JUNE 30, 1936: Investments Uninvested cash | Additional contributions: Additional contributions: Bishops Kip and Nichols Bed Fund Grace Cathedral Bed Fund Trinity Church Bed Fund Nurses' Alumnae Bed Fund Jessie D. and Elizabeth Woods CarrBed Fund (J. D. Seale bequest) Agnes Moody Bourn General Endowment: Lydia Paige Monteagle Free Work and Flower Fund Unspecified 14.00 529.50 | Income added to principal: St. Luke's Church Bed Fund Trinity Church Bed Fund Children's Ward Fund | Profits and lossesnetfrom sales and redemption of securities after deducting management fees, etc.: Consolidated Endowment Funds | Total additions during period | TOTAL ENDOWMENTS AT JUNE 30, 1937 STATUS OF ENDOWMENT FUNDS AT JUNE 30, 1937 TOTAL ENDOWMENT FUNDS AT JUNE 30, 1937 |

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The disposition of each of the endowments is presented in the following summary:

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\$265,909.94 \$2,587.66

| \$ 909.71 142.17 127.40 121.84 844.77 | \$2,145.89 | \$4,733.55 |
|--|--------------|--------------|
| \$199,071.28 30,720.99 50,766.68 15,336.23 14,621.06 | \$290,516.24 | \$556.426.18 |

LYDIA PAIGE MONTEAGLE ENDOWMENTS:

Total Consolidated Endowments \$268,497.60

| \$199,980,99 30,863,16 30,894,08 15,458,07 15,465,83 | |
|---|--|
| Lydia Paige Monteagle Hospital 30,863.16 Lydia Paige Monteagle Room 30,864.08 Louis Findlay Monteagle Room 15,458.07 Mary Warren Paige Free Bed 15,465.83 Timothy Paige Free Bed | |
| Monteagle Hosp: Monteagle Room y Monteagle Roc Paige Free Bed e Free Bed | |
| Lydia Paige Lydia Paige Louis Findla Mary Warren Timothy Paig | |
| | |

| 2.13 | 9.79 |
|---|--------------|
| \$292,665 | \$561,159.79 |
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| Total Lydia Paige Monteagle Endowments | Total |
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ASSERTED BY

To the Board of Directors St. Luke's Hospital

Gentlemen:

I have the honor to submit the Hospital Report for the year July 1, 1936 to June 30, 1937.

With the end of the "hospital depression" in 1935, we found ourselves in excellent financial and material condition. We had earned substantial surpluses all through the depression, largely the result of voluntary reduction in salaries and wages. From the standpoint of numbers, our trained personnel had been kept at something above normal. Surplus funds all through the depression had been used for equipment and maintenance, as well as for liberal employment of institutional workers and nurses.

Late in 1936 we began to notice the increased cost of hospital supplies, cotton and instruments particularly. Professional care of patients (especially nursing and other professional service) by this time had increased from \$1.96 per patient day in 1929, to \$2.35 - almost 20 percent. From January 1936 to July 1937, nursing cost per patient day had increased 127 percent. Of this increase, 15 percent was due to salary increases. From April 1937 to July 1937, nursing costs increased 40 per cent, largely attributable to the eight hour day for special nurses, which had thrown additional nursing on our general service.

The new training school course for three year pupils has resulted in an increased nursing cost per patient day of 72 percent, following decrease in availability of student nurses. When all of the twenty-eight month students have graduated, the availability of the student force as compared to the availability of the student under the twenty-eight months course, will decrease 27 percent. At the end of this fiscal year, July first, the decrease had amounted to 14 percent. By the end of February 1938, student availability will decrease another 13 percent, and the student will be worth to the hospital something like \$65.00 per month, where a year ago her services might have been rated at \$75.00 per month, based on salaries and hospital occupancy.

The availability or comparative value of student nurses under the 28 months course and the 36 months course, depends upon the following: The 28 months course required

for the year July 1, 1936 to June 30, 1937, . . loss, we found ourselves in excellent linencial and -nulov to tluser ent ylegral anotas too eat daucrat lis .comession had been used for equipment and had notessed ocst of nospitel supplies, cotton and instruments particularly. Professional care of patients (especially nursing and other professional service; by unis ties ind increased and other professional service; by unis ties ind increased from \$1.95 percent. From January 1955 to July 1957, nursing cost percent, day had increased 187 percent, of this increase, 15 percent was due to salary increases. From April 1957 to July 1957, nursing costs increased 40 percent in the first test of test of the first test of tes cent, lar ely attributable to the eight hour day for specmo no guistum fancitibus mo nit ban donto essemu lai petient day of 72 percent, following decrease in availmonth students have graduated, the availability of the student force as compared to the availability of the student under the twenty-sight months course, will decrease ZV percent. At the end of this fiscal year, July first, the decrease had emounted to 14 percent. By the end of something like \$65.00 per month, where a year ago her services might have been rated at \$75,00 per month, based 5808 hours; the 3 year course, 7488 hours. In the 28 months course, with 16 weeks probation, 4 weeks vacation, and 35 weeks non-nursing service, the student was away from the bedside 2509 hours, leaving 3299 hours for bedside care. In the 3 year course, with 26 weeks probation, 8 weeks vacation, 25 days sick leave and 56 weeks of departmental work, affiliation, etc., the student will be away from the bedside 4,362 hours, leaving but 3,126 hours bedside nursing in 3 years, as opposed to 3,299 in the 28 months course, or 1450 per year in the 28 months course, and 1042 hours per year in the 3 year course, a 27 percent decrease in availability for bedside work.

The cost of adequate pupil nurse training is a matter which should not be the concern of hospitals or hospital patients who pay hospital bills. The institution of the present nurse training course has been long overdue in California, where nurses have been given sub-standard training since 1919.

Special duty nursing has been placed on an 8 hour basis, with the result that very frequently 8 hours out of 24, special duty must be cared for by hospital nurses. The number of specials employed has dropped off remarkably - at one time 21 percent - resulting in further increase of hospital nursing, to replace special nursing.

In terms of employment, this lack of availability on the part of student nurses has resulted in our employing additional nursing personnel, i.e., 25 graduate nurses, ll nursing aides and 2 orderlies.

Fiscal Year Fiscal Year Fiscal Year 1935-1936 1936-1937 1937-1938 \$35,943.42 \$55,694.98 \$66,000.00

If salaries are increased 10% for the 9 remaining months of this fiscal year, as they may be, add 5,000.00 \$71,000.00

Percentage of increase 55% 100%

Nursing Cost

"Modern Hospital" in a recent editorial, mentioned the fact that about fifty years ago, it was deemed unethical and improper for a nurse to take a patient's temperature, as the placing of a thermometer in the patient's mouth was at that time "the practice of medicine". In those days the doctor's methods of developing information concerning his patient were few. His activities were confined largely

5808 hours; the 5 year course, 7488 hours. In the 28 months course, with 16 weeks probation, 4 weeks vacation, and 35 weeks non-nursing service, the student was away from the bedside 2509 hours, leaving 3899 hours for bedside care. In the 3 year course, with 26 weeks probation, 8 weeks vacation, 25 days sick leave and 56 weeks of departmental work, affiliation, etc., the student will be away from the bedside 4,368 hours, leaving but 5,126 hours bedside nursing in 5 years, as opposed to 5,299 in the 28 months course, or 1450 per year in the 28 months course, and 1048 hours per year in the 5 year course, a 27 percent decrease in availability for bedside work.

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to feeling the pulse, the patient's brow, and a look at the tongue or perhaps the throat. As medicine developed more complicated and numerous diagnostic procedures, examinations demanded so much of the doctor's time that he could care for but few patients. As a result, he gradually turned over technical diagnostic procedures, one after another, to the nurse, until today she not only takes and charts temperatures in an intelligent, scientific manner, but takes and records the pulse. Today, doctors demand that the nurse be taught more about the pulse and temperature. They no longer consider such teaching and procedure unethical or the "practice of medicine". The nurse is further trained to observe and record other physical signs and symptoms, many of which were not even thought of in diagnosis years ago.

The nurse, also, under the doctor's direction actually gives treatment. Hypodermic medication by nurses years ago would have been in violent conflict with the rules governing the "practice of medicine". Today we teach husbands and wives to give drugs and insulin hypodermically to other members of the family, so that doctors and nurses may be relieved of the necessity for so doing.

Doctors today could care for but few patients if nurses, Interns and Residents, Laboratory and X-ray technicians did not assist them in the practice of medicine to the extent they now do. The doctor, instead of complaining of such things, frequently complains if they are not done for him.

By the same token, nurses must be relieved of their one-time maid's duties, in order that they may attend to the increasing number of technical medical procedures which are being thrust upon them, and not usurped by them.

To insist that the nurse continue to perform maid's duties, would simply mean that we wish to restrict or confine maid's work to nurses, in order that the amount of work available for nurses may be increased at the patient's and doctor's expense. Insistence upon this procedure would not arise in a desire to protect patients or the ethics of nursing. Such insistence would be in the nature of a taboo or a trade union restriction along the line of what is done when certain things or procedures are declared "off limits" for certain people so that they may be monopolized by a privileged class that has the power to do so.

Today we do not have enough doctors to perform nursing duties; we do not have enough nurses to perform maid's duties. A nurse remains in the nursing field about

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Today we do not have enough doctors to perform nursing duties; we do not have enough nurses to perform moid's duties. A nurse remains in the nursing field about

seven years. The expense of training a new nursing force for the country every seven years is too great to be borne by the public and hospitals. We shall have to employ maids for unskilled work, and train fewer nurses in the skilled technical work worthy of their hire, pay them well for this work, and perhaps in this way keep more of them in hospitals and out of non-nursing duties, or just "any refuge" from under-pay and long hours.

Student nurses can be given their class-room and didactic training in Junior Colleges or Universities at their own or at public expense. With class-room training paid for and out of the way, the nurse's practical training can be given with economy, efficiency, and safety to patients, in the same manner as Intern training is now given doctors. The student nurse can then be paid for such services as she performs, and the expense of her training will not be borne by patients and doctors. San Francisco hospital patients are now contributing about \$265,000 per year to the cost of nurse training. It is the duty of those responsible for hospitals to see that this entirely unnecessary hospital expense is relieved - and not shifted to other groups at the expense of hospital efficiency.

Hospitals cannot be conducted at all in these days of complicated and exact technical procedure, without highly trained non-nursing Staffs. Trained business, engineering and technical personnel cannot be penalized in matters of pay in order that outworn systems of nursing and nurse training may be maintained. We must keep in mind the fact that hospital policies must be planned in the interests of sick people, and not for special personnel groups.

Next comes the increase in labor cost. After considerable negotiation with labor unions, minimum wages for institutional help (non-skilled) were set at \$79.50 for men and \$75.00 for women. This resulted in a payroll increase of \$2,628.60 per month. (Later increased to \$90 and \$85, a total of \$4,562.14 per month).

Here we have two legitimate and long overdue increases in the cost of hospital operation. As now organized, society no longer affords sufficient labor or trained personnel willing to devote itself to hospital service on a charity basis. Hospital efficiency in the past has suffered as a result of the fact that individuals willing to work on a charity basis have been largely those not desired by industry or business. Hospitals from

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the health standpoint are most important; from the "industry" and money standpoint, hospitals rank fifth in all business activities. Thus, the best in ability and training must be attached to and held in hospital work, with adequate pay and training.

Money for increased pay of labor can be found without injury to hospital patients. Patients directly, and doctors indirectly, should not be asked to continue to pay the increasing costs of nurse training - the nurse or the State should do so. Antique systems should be discarded for economical and efficient methods.

We are certainly not justified in conducting training schools at the expense of general hospital welfare, or at the expense of the part of the public that pays it's hospital bills, or by offering sub-standard nurse training to pupil nurses.

There are two principal methods of operating hospitals; one by nursing orders, and the other by groups of lay individuals on salary. In hospitals operated by nursing orders, laboratory, office, dietary, nursing, operating room and other of the higher paid positions are filled by members of the nursing order. As a result, hospitals operated by nursing orders have payrolls approximately 30 percent (and more with recent labor costs) less than it is possible to operate with lay-personnel.

With recent increases in the cost of operating lay-hospitals, rates charged patients must be increased to cover the cost of operation. Hospitals operated by nursing orders will not have to increase rates to any appreciable extent. Hence, they can be operated with much lower charges to the public. Hospital bills will be more out of range than ever, as we cannot compel, or even ask our personnel to work on a charity basis, or at pay lower than similar individuals are paid in industry. Philanthropy and endowments can no longer be relied upon to pay the difference between the cost of operation and what the patient pays. Unless appropriate action is taken, lay-operated hospitals in the end may have to turn over the care of the sick to nursing orders. Industrial patients, particularly, will have to be turned over to hospitals operated by nursing orders. Many insurance companies today pay dividends on charity hospital rates.

For years the industrial patient has been cared for at less than cost, as a result of the fact that

"tndustry and soney etanogodut, hospitals trak fifth the state of the best in shifty in sone training must be state of the best in hospital work, with adequate pay and training. Money for increased pay of labor can be found without injury to heaptest patients. Patients directly. Should not be seled to continue and doctors indirectly, should not be seled to continue to pay the increasing costs of nurse training a true of the State should be antique systems should be dissarded for economical and efficient methods: training schools at the expense of general hospital welfare, or at the expense of the part of the public that pays sectod lique of painters nospitals; one by nursing orders; and the other by groups of lay individuals on selery. In hospitals operated by nursing nursing orders, incommon other or the higher paid positions are filled by members of the nursing order. As a result, hospitals operated by nursing orders have payrolls approximately 30 percent (and more with recent labor costs) less than it is possible to operate with lay-personnel. - - second of tems etact of begreno setar alertqued-tol and nd betraego alottgach. . Holtprego to taco ent nevos of be was of soter esserout of even Jon filty stebro salerum appreciable extent. Honde, they can be operated with much lower charges to the public. Hospital bills will to legmon formed as a ser, as we campor to the et at the company of the cat as a charity busis, or at . . gritudal at hing oro elephividat ratials and revol you what the pottent pays. Unless appropriate action is taken, lay-operated mospitals in the end may be vo to turn ower the descript of the stak to nutsing orders. Industrial of nevo bearus ed of event flow . Wirelesting admenting concrete with the control of the control compenies today pay dividends on charity hospital rates. .

hospitals have underbid each other for this class of work, so that "available beds" might be kept occupied, and so that Staff doctors might have all their patients in the hospital where they care for their private patients.

Another reason for the loss on industrial accounts, not generally recognized, is that the industrial patient remains in the hospital from two to three times as long as the private patient. Both private and industrial patients incur the heaviest part of the hospital bill for operation, laboratory and X-ray investigation within the first few days of stay. The private patient leaves the hospital within two weeks, with an average per day revenue to the hospital of something like \$8.00. The industrial patient remains in the hospital from twenty to thirty days, because of serious injury as a rule, paying for the last half or two-thirds of his stay at \$4.00 or \$5.00 a day. In this way, the average per day revenue from the industrial patient is a little more than half that of the non-industrial patient.

We have had more serious problems to solve in past years than those which at present seem to be connected with increased labor and nursing costs. These problems can be handled simply, if policies attuned to the times are adopted.

One answer will be the general adoption of Hospital Service Insurance, which will spread increased hospital costs over thousands of individuals, who can without difficulty bear a \$2.00 increase in monthly dues better than an unprotected individual can bear an already unbearable hospital bill of \$200, increased by \$100. A \$2.00 increase in hospital dues will not be felt by the individual, but it will furnish the required funds to pay general duty nurses and institutional help an adequate and honest wage.

We shall need about \$70,000 more for this year's expense than we earned last year. As a result, we shall be compelled to reduce costs as much as possible and increase revenue along the following lines:

A. To Reduce Costs:

- l. Porter or janitor service must be taken over by building maintenance firms, with the elimination of about ten porters.
- 2. The student nurse must bear the expense of her education through service or tuition.

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A. To Reduce Costs:

- 1. Porter or jabitor service must be taken over by building maintenance firms, with the elimination of about ten porters.
 - 2. The student nurse must bear the expense of her education through service or tuition.

3. Nurse aides or maids will have to take over maid service that should be dropped by pupil nurses and general duty nurses.

2. To Increase Revenue:

- 1. Industrial insurance companies must pay full costs for industrial hospitalization.
- 2. Hospital Insurance must be taken over and administered as a public service in which medical policy will be controlled by medical men, and financial administrative policy by hospitals and the public.
- 3. Special duty nursing now performed by hospital general duty nurses must be paid for by the special duty patient at cost.
- 4. Room rates must be increased.

Catholic, Jewish and Protestant churches cooperate in the interest of religious and racial tolerance.

Our church leaders could without doubt, effect a plan that would equalize hospital rates in Jewish, Catholic and Protestant hospitals. Surplus revenue accruing in Catholic hospitals to be used by Catholic charities for non-industrial and part-pay Catholic patients.

A prominent Catholic clergyman, in charge of welfare work in California, understands this situation, and is favorably disposed toward some such arrangement.

If Church authorities will assist Church hospitals in this particular field, we may avoid serious deficits and deterioration of service in non-Catholic hospitals.

We must recognize the fact that hospitals have entered upon a new period, or era, of operation and financing. We can and must take prompt and courageous action, even though we may have to upset or rearrange present procedures.

3. Nurse aides or maids will by ve to teke To Increase Revenuet .noiv end administered as a public service in which medical policy will be cometrolled by medical men, and financial the public. . Jaco in .bosneront od faum sofor mook Catholic, Jowish and Profestant churches erelot intent bus avoigilor to tacrotal out at officeon *0000 Our church londers could without doubt, effect a plan that would equalize hospital rates in Jovish, Catholic and Protestant hospitals. Surplus revenue obsilties for non-industrial and part-pay Catholic patas Ju of A prominent Catholic clergyman, in charge of welfore work in California, understands this situation, and is favorably disposed toward some such arrengement. hospitals in this particular field, we may avoid scrious deficits and doterior ation of service in non-Cathelic have entered upon a new period, or ers, of operation and financing. We can and must take prompt and courage cous notion, even though we may invo to upset or rearrange PROFESSIONAL STAFF

Staff contribution to professional service afforded Endowment and Community Chest patients, amounted in dollars

and cents, to something like \$42,000.00.

The work of the House Staff was excellent, our men having come from the following Schools:

Yale University Medical School
Rush Medical School
University of Michigan Medical School
University of Nebraska Medical School
University of Alberta Medical School
Stanford University Medical School
University of California Medical School

year 1937-1938, are from the following Schools:

Rush Medical School
McGill University Medical School
Creighton Medical School
Jefferson Medical School
University of Iowa Medical School
Marquette University Medical School
Michigan University Medical School

LABORATORY AND X-RAY

The work of these departments was greatly appreciated by the medical men practicing here.

A new rotating target shockproof X-ray assembly was installed this year. Pictures taken with this tube are greatly superior to those taken by the fixed target tube.

Several items of new equipment were furnished the Laboratory, and a number of new scientific procedures have been installed.

and cents, to something like \$42,000.00.

Machil University Medical School

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-woods tagent anitator won A moof X-ray assembly was installed this year. Pictures

were furnished the Laboratory, and a number of new shelfstant need oven serubecorn offitneles CLINIC

Mrs. O'Dea, after fourteen years of service, has had to give up her work in the Clinic

on account of ill health.
Under Mrs. O'Dea's charge, the Clinic developed into a most efficient and worthwhile department. Her work with the private patients of Staff men and Mission doctors has been conducted without misunderstanding and difficulty, so frequently connected with Clinic care of private patients. Her attention to economic and efficient expenditure of endowment funds has been much appreciated by the Staff and management. She has invariably found ways and means to care for patients recommended by our doctors, both in the hospital and in the home.

The loss of Mrs. O'Dea's service would have been more serious if Miss McGregor had not been available to take up the work which is now being conducted by Miss Zorin and Miss McGregor in a highly satisfactory manner.

BUILDINGS AND OTHER DEPARTMENTS

Very few changes, additions or alterations have been made in any of the departments this past year, as a result

of the fact that they had reached a high state of efficiency in both equipment and service.

The wooden buildings are deteriorating rapidly and the time may arrive soon when we shall have to remove them.

SUMMARY OF STATISTICS

The daily average for patient occupancy throughout the year was almost exactly eighty per cent, or capacity. As a consequence, all other patient statistics have reached about the maximum possi-

ble for this hospitals.

We treated 5417 patients, or

281 more than in 1936.

There were fewer deaths by 12

than last year.

years of service, has had to Under Mrs. O'Dea's charge, the Chinic developed into much appreciated by the Staff and management. She has highly satisfactory manner. efficiency in both equipment and services. deteriorating rapidly and the time may arrive moon than last year.

There were 58,574 patient days, which means that the average patient stay in hospital was 10-4/5 days.

The number of operations performed was over 700 less than last year, though the number of patients operated upon was 15 more than last year.

Both X-ray pictures and treatments increased sharply in number, as did laboratory examinations.

The cost per patient day was 73 cents higher than last year. Of this 73 cents, but 10 cents resulted from increase in cost of subsistence, the balance being accounted for by increased labor and nursing cost.

We have held an even keel throughout the year, in spite of the very unusual demands and conditions that have confronted us. We shall continue to do so, with necessary changes in policy.

Changes in policy are beyond the authority and control of hospital management and hospital executives. Policy must be defined and carried out by the public, the medical profession and individual hospital Boards.

Respectfully submitted,

HOWARD H. JOHNSON, M.D. Director

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HOWARD H. JOHNSON, M.D. Director

GENERAL STATISTICS For the Year Inding June 30, 1957

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The forty-eighth Annual Report of the School of Nursing for the year ending June 30, 1937, is herewith respectfully submitted.

| Students Enrolled Students Admitted Disqualified or left Graduated Number of Students Ill Days Illness Students on Leave Days Leave Students Hospitalized Days Hospital Care Number of Instructors Floor Supervisors, T.S.O. & S.R. Assistants to Supervisors Surgical Supervisors General Duty Nurses in Surgery Average General Duty Nurses on Floors. | 1923 71 35 14 19 | 31 149 864 56 513 62 458 2 7 | 113 61 32 | 105 52 | 117 53 16 | 112 47 16 36 93 807 38 292 36 374 2 11 10 12 12 12 |
|--|------------------------------|--|-----------------|-----------|-----------------|--|
| Average number of Nurses Aides | | | | | 12 7 | 20 |

The figures above show a decrease in the number of student nurses ill, the number necessary to hospitalize and the number on leave, and an increase in the number of Assistant Supervisors, general duty nurses and nurses' aides.

The expense of providing bedside nursing care has increased steadily during the year. Changes in the curriculum, increases in salaries, the straight eight hour schedule for special nurses, orderlies and attendants, and a six day week for students, have all contributed to this expense. In fact every change has either increased salaries or shortened the working day without improving the quality of bedside care, as the changes of personnel have resulted in a less stable and in consequence less satisfactory service. As I mentioned in my report of June 30, 1936, the three year program for Schools of. Nursing, as finally adopted by the State, should and will result in a much better prepared nurse for the Community; but the requirements of the new curriculum have reduced the number of student hours available for bedside care. The situation has made necessary the employment of many more graduate nurses for this service, with a consequent heavy increase in nursing expense.

Some of the outstanding changes which will continue to be expensive include:

A. Student nurses

1. A six month rather than a four month probation period for pupils. This is an increase of two

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4. Student nurses
1. A six month rother than a four month probation
period for pupils. This is an increase of two

months in which the student is on duty only four hours daily. As our Senior graduating students leave the School in June and January there is an interim of two months in which the Seniors have gone and the probationers who formerly want on full time duty at this time, are still uncapped and on four hour duty. This is a particularly expensive period as vacations for students and graduates occur at this time as well, and add to the general shortage of responsible personnel. 2. A minimum increase of about 160 hours of class work which takes the student from the bedside. 3. Inclusion of class hours in the eight hour day. At least 50% of the classes were formerly given in excess of the eight hour working day. 4. An increase of four weeks vacation allowed each student. 5. An allowance of two weeks annually for sickness. Time lost through illness was formerly made up by the seniors before graduation. (I always regarded the making

- up of this time as a part payment for the expense of nursing care).
- 6. A six day week, allowing students one full day off each week. Formerly the 48 hour week was so divided that students were on duty between 7 and 10 every morning when the nursing load was heaviest.
- 7. A six weeks affiliation for Communicable Disease experience requiring from three to six students to be away continuously.
- 8. A requirement of four months to be spent in special services, as Out-Patient Department, Supply Room, Physiotherapy and Emergency Room. Although eight months were added to the former 28 months course, less time is available for bedside care as shown below:

2 months in additional probation

1 months affiliation

4 months in special services (part of this time is at the bedside).

12 months additional vacation and illness allowance.

This program is, as I said, of decided advantage to the student but in every instance is an avenue for increased expense.

B. Special Nurses.

1. The adoption, in May 1937, by the San Francisco County Nurses' Association of a straight eight hour day

and of bbs ban . Llow an said aind in wood aedrubers ban At least 50% of the classes were formerly given in excess of the eight hour working day. . 4. An increase of four weeks vacation allowed 5. An allowance of two weeks annually for stokuess. seriors before graduation. It always regarded arotaes ing core). -ald aldsolmummoo rol not satisfic ameew xia A . . T be away constanuously. . Physiotherapy and Emergency Room, . Although eight months dere added to the former 88 months course, less time is and sellitte agreem &f .:. (abiabad ont to al amit aid) This program is, as I said, of decided advantage to the student but in every instance is an avenue for in-B. Special Marses. 1. The adoption, in May 1957, by the Son Frencisco County Nurses' Association of a straight eight hour day

for special nurses has placed a greater number of our patients on general Louse duty. My records since May show a decrease of nurses called from a daily average of 46.5 to 36.2. It requires three nurses now rather than two, to cover twenty-four hours. The decrease in the number called, plus the decrease in the hours worked, leaves at least about one-third of the patients, formerly on special duty, to be nursed by the general duty service at the expense of the Hospital. Special nurses employed by the day for general house duty now only work eight consecutive hours, which is again expensive, as the load is heaviest in the morning and evening. These nurses formerly took hours off during the afternoon. Hourly nursing rates have increased from fifty cents to one dollar an hour.

- 2. General duty nurses employed by the month are still on a nine hour day, but usually take their time off in the middle of the day. This is not popular. How long this will continue I do not know. The San Francisco County Hospital and the University of California have an eight hour unbroken day, and I am told that Stanford, the French and St. Joseph's Hospitals are adopting this plan September first. I am told, however, by the Registrar of the San Francisco County Nurses Association that our "turn over" is much less than in most hospitals and that the nurses enjoy working at St. Luke's. We find the turnover bad enough as it interferes with satisfactory nursing care both to the Patient, the Doctor and the Supervisor.
- 3. Salaries for this group increased this year from \$75 to \$90 and \$95, including meals and laundry.
- 4. Nurses aides, employed to relieve to some extent this situation by picking up non-nursing duties, have increased their salaries from \$35 or \$40 with maintenance, to \$75 without maintenance. The majority chose the latter. They work a 6 day week, with a straight eight hour day. The employment of nurses aides for any work connected with actual care of the sick is frowned upon by the Medical and Nursing Associations. Our Attendants are employed for non-nursing duties only, but if their salaries continue to increase, their value from an expense viewpoint is decidedly lessened, at least while salaries and hours for graduate nurses doing general duty remain as they are.
- 5. Orderlies, also, have a straight 8 hour day with increased pay, again necessitating the employment of more men to cover the same amount of work and hours.
- 6. The daily average patient list for the year was high (160.5) sometimes reaching 186.

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2. Concral duty nurses employed by the month are still on a mine hour day, but usually take their time off in the middle of the day. This is not popular, How long this will continue I do not know. The San Francisco County Hospital and the University of California have an eight hour unbroken day, and I am told that Stanford, the Franch and St. Joseph's Hospitals are adopting this plan September first. I am told, however, by the Registrar of the San Francisco County Murses ever, by the Registrar of the San Francisco County Murses hospitals and that our "turn over" is much less tann in most hospitals and that the nurses enjoy working at St. Luke's. Satisfactory nursing care both to the Fatient, the satisfactory nursing care both to the Fatient, the

Trom \$75 to \$90 and \$95, including meals and laundry.

4. Nurses sides, employed to relieve to some extent this situation by picking up non-nursing duties, baye iscreased their salaries from \$35 or \$40 with maintenance, to \$75 without maintenance. The majority obose the latter. They work a 6 day week, with a straight oight hour day. The employment of nurses aides for any work connected with a ctual care of the sick is frowned upon by the Medical and Mursing Associations. Our Attendants are employed for non-nursing duties only, but if their salaries or omployed for non-nursing duties only, but if their salaries continue to increase, their value from an expense viewpoint is decidedly lessened, at least while salaries and hours for graduate nurses doing general duty remain as they are.

5. Orderlies, also, have a straight 8 hour day with increased pay, again necessitating the employment of more men to cover the same amount of work and hours,

6. The daily average patient list for the year was high (160.5) soratimes reaching 186.

Thirty-two students wrote the State Board Examination for Registration during our fiscal year. The results were as follows: A - 3; B - 15; C - 13; D - 0; F - 1. The student failing graduated eight years ago and cannot be considered to have affected the record of the current School. The State report shows our School average to have exceeded the State mean in all subjects written. The record for the coming year promises to be even better as the result of the first of the series of examinations are already reported as follows:

443 graduates took this examination

25 received a grade of A.

5 St. Luke's graduates received the grade of A

The State report reads: " St. Luke's School of Nursing in San Francisco (made) the second highest mean in the State". This gives our School first place in Northern California.

This record is very encouraging to both the Instructors, the Lecturers and the Students themselves.

Of the thirty-six students who graduated in June 1936, twenty-six took advanced work to obtain their threeyear diplomas.

18 entered Highland School of Nursing, Oakland

2 entered San Francisco Hospital

2 entered White Memorial Hospital, Los Angeles 1 entered Los Angeles General School of Nursing

1 entered Stanford University, and is working there toward a degree

1 entered Children's Hospital School of Nursing, San Francisco

1 entered the University of Hawaii for the Public Health Nursing course.

At the end of the fiscal year we find this same group scattered in many positions and places:

> 3 have married 2 not nursing

1 Doctor's office nurse, Santa Cruz

l Public Health Nurse, Hawaii l Supervisor at Arroya Sanitarium, Alameda Co. 2 Positions in Operating Rooms, Santa Rosa and

Oakland

2 Staff positions in Santa Cruz and San Francisco County Hospital

3 Hospital positions in Marysville

l Private duty, Los Angeles l Supervising, St. Luke's

3 Operating Room, St. Luke's 1 General Duty, St. Luke's 4 Private Duty, San Francisco

Thirty-two students wrote the State Board Exemination for Registration during our fiscal year. The regults were as follows: A -. 3: B - 15: C - 18: D - 0: F - 1.
The student failing graduated eight years ago and connet Sonoel. The State report shows our School average to have oxceeded the State moon in all subjects written. The 1 10 charp a bevience 38 The State report reads: " ... St. Luke's School of Nursing . an Son Francisco (made) the second highest mean in the State". This gives our School first place in Northern Cal iformia. . Instructors, the Lecturers and the Students thouselves. Of the thirty-six students was graducted in June 1986, twenty-six took novement work to obtain their three-.asmolath They 18 entered Highland School of Nursing, Colland S entered Wante Memorial Heaptel, Los engeles I entered Los Lagares General School of Mursing antered Startord Daivorsity, and is vertical Baterny lo Looms Latice of a modellato beterne i I outsted the University of Howell for the Public Health Nursing Course. quora eans sint bail ow may local ads to bao out th sanding bus anothron your of bereffee. Dogtor's office nurse, Sente Oruz tiowed goesen difficel offers I 1 Supervisor at Arroya Scritering, slameds Co. 2 Positions in Operating Rooms, Santa Rose and S Staff positions in Sonta Cruz and Son Francisco a private dutie los ingeles 1 Supervising, St. Luke's 6 Operating Room, St. Inke's 1 Comercia Cry. St. Luke's 4 Private Luty, San Francisco

It is gratifying to find from an analysis of this kind that our graduates are given positions many times in the Hospital where they take their advanced courses. Judging from the many places in which they are nursing, they seem to be meeting the needs of the Community, which is the real purpose of nurse training.

Many of our former graduates are also engaged in interesting work; Alice Tyson, class of 1931, and Dorothy Nagano, 1935, received Public Health certificates this year at the University of California. Dolores García, 1936, and Lois Rasmussen, 1936, received Public Health certificates this year from the University of Hawaii. These two, with eight or nine other graduates of St. Luke's are all doing Public Health nursing on the various Islands of Hawaii.

Thelma Moore Akana, class of 1926, has been appointed Assistant Administrative Director of Public Health Nursing in the Territory of Hawaii, under the Board of Health. This is a splendid achievement both for her and for St. Luke's. Alice Young, class of 1932, has been given a scholarship by the Board of Health in Hawaii, through the Social Security Fund. Miss Young, who is already a Public Health nurse, is going to Columbia University, New York, to secure her She has been chosen for a course in Midwifery B.S. degree. at the Lobenstine Clinic, New York. This clinic is the only one of its kind in the United States, and takes only three students a year. Miss Young is preparing to bring this work to the Islands. Miss Bernadine Grogan (1935) has been given a position as Assistant Supervisor in the Operating Room of the Alameda County Hospital. Irene Ransom (1933) is Superintendent of the Madera Sanitarium, in Madera. Fredricka Juhl (1936) is Pediatric Supervisor at Arroya Sanitarium, Oakland,

Applications for the September class are unusually good, both in number and quality. We plan to admit a large class and appreciate having enough applications from which to really select the group.

The Women's Board established two Scholarships, The Lydia Paige Monteagle Scholarship for September, and the Elizabeth Whitelaw Reid Scholarship for February, each giving Seventy-five Dollars to the applicant whom we consider to have the best personality and scholastic record. Attractive notices were placed in the High Schools and Junior Colleges, and accomplished a double purpose. The attention of hundreds of girls was focused on the qualifications St. Luke's desires for its student nurses, which increased applications generally; and at the same time interested several splendid girls to apply directly for the Scholarship. This is one of the most constructive pieces of Work done for the School, for which we are very grateful.

It is gratifying to find from an analysis of this kind that our graduates are given positions many times in the Hospital where they take their advanced courses. Judging from the many places in which they are nursing, they seem to be meeting the noeds of the Community, which is the real purpose of nurse training.

Mmy of our former graduates are also engaged in interesting work; Alice Tysom, class of 1951, and Dorothy Nogano, 1955, received Public Health certificates this year at the University of California. Delores Carein, 1956, and Lois Hammeson, 1956, received Public Health certificates this year from the University of Hawaii. These two, with this year from the University of Hawaii. These two, with eight or nine other graduates of St. Luko's are all doing Public Health aursing on the various Islands of Hawaii.

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Fredricka Juhl (1986) is Podiatrie Supervisor et Arroys.

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The Nurses' Home is in good condition. New blankets and rugs were added where needed, and considerable painting and repairing was done during the year. The outstanding need of the School at present is an adequate lecture hall, large enough to accommodate a general school meeting. I have proposed taking some rooms in the lower floor of the Nurses' Home adjoining the present classroom. Dr. Johnson thinks favorably of this idea, but with expenses so out of range I feel confident that we can continue to keep our record up without it until a more favorable time.

The death of Helen Watson, our Pediatric Supervisor, was a great loss to the School. She had been with us a long time and was very dearly loved by everyone. We have not yet replaced her. It will be difficult to replace her personality and ability. We hope to have one of our own gradutes who has had, or will take Pediatric Supervision.

The School wishes to extend to the Board of Women their sympathy in the passing of Mrs. William Ford Nichols and Mrs. Courtland Benedict. Mrs. Benedict was a graduate of St. Luke's. They were both deeply interested in anything planned by the Women's Board for the good of the School. We seldom had a Tea or a function of any kind that they did not take time to attend and lend us their encouragement. We shall miss their quiet and kindly helpfulness.

The Graduating Exercises of the Class of 1937 were held on June tenth. The day began dismally with a torrent of rain, but with the combined hopes and prayers of both pupils and patients the sun was shining by three o'clock and the ceremony took place as usual in the Garden. Mr. Ohlhoff conducted Chapel Service, Archdeacon Hodgkin giving the baccalaureate sermon. Following the Invocation by the Archdeacon, Bishop Parsons spoke to the Class on the wisdom and happiness to be found in beginning their life work as a great adventure, welcoming every new experience as a part of a great plan. Mr. Dibblee, President of the Board, presented the diplomas. Dr. Johnson was out of town and unable to assist him this year. Mrs. Thacher, President of the Women's Board, presented each of the graduates with a copy of the Gospel of St. Luke. Mr. Ohlhoff lead the Class in repeating the Nightingale Pledge and the Exercises closed with the Bishop's benedict-The usual Tea for the graduates and friends of the Hospital followed. A dance in the evening ended a most successful and happy day. The School has asked me to tell the Board how much they appreciate all that was done to make this day a memorable one for them.

The names of the 1937 graduates follow:

The Nurses' Home is in good condition, New blacks and rugs were added where needed, and considerable printing and repairing was done during the year. The outstanding need of the School at present is an adequate locture half, large enough to accommodate a general school meeting. I have proposed taking some rooms in the lower floor of the Nurses' Home adjoining the present classroom. Dr. Johnson thinks favorably of this idea, but with expenses so out of range I sel confident that we can continue to keep our record up without it until a more favorable time.

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Agnes Hall Marie B. Cadigan Edwyna Louise Davis Dorothy Dysart Berniece Goodreau Alice Johns Phillis Margaret Lister Helen E. Lanning
Beryl Elizabeth Marlar Dorothy Cossano M Sadie E. O'Dell Doris May Poxon
June Edlill Putz
Ruth Caroline Stromquist Pansy A. Quandt
Estelle Thorp Charlot N. Rader
Dorothy M. Alton Marie E. Schroed
Ruth M. Cowan
Tressa Hol Ruth M. Cowan

Tressa Helen Cramer

Beth Edmondstone

Maxine Graham

Ethel A. Smith

Mary Belle Spivey

Louise Sundquist Laurene Gibbons

Alice Jean Heacock Virginia Heu de Bourck Sybil Margaret Hewitt Geneva E. Hickman Jessie Catherine Johnson Helen E. Kennedy Dorothy Cossano Martin Dorothy F. Mothershead Marie E. Schroeder Nancy Deleslia Wooddell

The Staff and Students take this opportunity to thank the Medical and Surgical Staff for the time they have so generously given the School both in caring for the health and the education of the pupils. We offer the excellent State Board record as our appropriate thanks.

To the Board of Directors, the Women's Board, the Hospital and to all friends of the School whose interest helps us go forward, we are sincerely appreciative.

Respectfully submitted,

GRACE M. KENNEDY

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Dorothy Syeart

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Alice Jeans

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Corinno Kellum
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June Kellil Pate
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Kenty Delesits Wooddell

The Stoff and Students toke this opportunity to thonk the Vie Wester the View Index so the Wester to the View Index so generously given the States he beauth in baring for the health and the studention of the pupils. We offer the excellent State Board record ne our appropriate thanks.

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· Respectfully substitted,

GRACE M. KENNEDY

REPORT OF THE LABORATORY

For the Year Ending June 30, 1937

There is little to report from this Department this year, other than the twe have carried on with the usual yearly increase of ten percent in work done, as shown in the attached statistical report. It is perhaps of interest that, since the reorganization of the department in 1929, the increase now totals one hundred percent. Doubled work without enlarged quarters raises a difficult problem here, as elsewhere in the hospital.

During the year the technical work involved in basal metabolism determinations and electrocardiography has been taken over by the laboratory technicians. The professional interpretation of these records remains under the capable direction of Dr. J. Marion Read.

As the year ends, plans are completed and construction is about to start, on a new and commodious animal house provided with all modern conveniences for the care and comfort of our humble assistants, the rabbits and guinea pigs.

Investigative work in the correlation of the various tests of liver function is being continued over into the coming year.

Respectfully submitted,

W. P. Stowe, M.D.
Pathologist

the department in 1929, the increase now totals one hundred percent. Doubled work without enlarged ounters raises a difficult problem here, as elsewhere in the hospital. During the year the technical work involved in best metabolism determine rions and elictrocardiography has been taken over ow the laboratory technicidns. The erof eliconal anterpresention of these records reading under the dags ble direction of Dr. Mortage Board. 1 11 1. As the yest ends, plans are completed and commod-construction is a bout to start; on a new and commod-number and some starts and our new are to the care and common at our numble assistdried to notice of in the continue of the bound to a to the continued of t Hespectfully submitted,

W. P. Stowe, M.D.

LABORATORY REPORT

For the Year Ending June 30, 1937

| Urinalyses Routine Cystoscopic P.S.P. | 7692 138 137 |
|---|--|
| Counts Chemistries Coagulation time Bleeding time Kahns Wassermanns Typings Icteric index Van den Bergh | 8076 1391 198 72 2163 2321 971 99 22 |
| Sedimentation time Rose Bengal Friedmann pregnancy test Red Cell Fragility test Takata-Ara Bacteriology | 121 34 178 6 |
| Blood cultures Throat cultures Other cultures Smears Sputa Agglutination tests Autogenous vaccine Guinea pig inoculations | 133 466 892 687 265 114 51 43 |
| Stools Spinal fluids Gastric analyses Pleural and abdominal fluids | 655 153 124 65 |
| B.M.R. E.K.G. | 286 209 |
| Autopsies | 72 |
| Tissues - surgical Gross only -cases | 570 988 29401 |
| | 20101 |

LABORATORY REPORT

For the Year Ending June 30, 1937

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REPORT OF THE X-RAY DEPARTMENT

During the year ending June 30, 1937 the X-ray Department has taken a total of 12,486 roentgenograms and made 609 fluoroscopic examinations. This makes a total of 13,195 examinations. This is an increase of 1,575 examinations over the previous year. There were 1,369 treatments given which is 177 more than in the previous year.

There has been no new major equipment purchased for the X-ray Department during the past year. A full-time technician and a half-time Resident have been added to the regular Staff, which has speeded the work and improves the service.

A General Electric shock-proof rotating anode tube has been ordered and will be installed within a few weeks. This will improve the quality of the films and bring the department up to date.

The department is well equipped but is sadly in need of new and larger quarters. We need more dressing rooms and a waiting room for out-patients and hope that in the near future these changes can be made.

Respectfully submitted,

Charles C. Fulmer, M.D. Roentgenologist

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Respectfully submitted;

Cheries C. Fulmer, M.D. Roentgenologist

REPORT OF THE X-RAY DEPARTMENT

Year Ending June 30, 1937

| Abdomen Ankle Arm Chest Elbow Femur Finger Foot Gall Bladder Hand Head Hip Humerus Jaw Knee Leg Pelvis Shoulder Spine Teeth Toes Wrist | 3585 456 216 1408 246 164 99 280 1166 177 960 274 43 117 306 404 130 213 870 969 12 391 |
|--|--|
| Fluoroscopic examinations | 609 |
| | 13095 |
| Treatments | 1369 |

THE THE X-RAY DEPARTMENT

Year Ending June 30, 1937

| | Abdomen |
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REPORT OF THE PHYSICAL THERAPY DEPARTMENT

This Department gave a total of 3,468 treatments during the year ending June 30, 1937. During the previous year 3,198 treatments were given, showing a gain of 270 treatments.

There have been no changes made in the Department and no new equipment purchased during the rast year.

Respectfully submitted,

Charles C. Fulmer, M.D.

REPORT OF THE PHYSICAL THERAPY DEPARTMENT

This Department gave a total of 3,466 treatments during the year ending June 30, 1937. During the previous year 3,198 treatments were given, showing a gain of 870 treatments.

There have been no changes made in the Department and no new equipment purchased during the gast year.

Respectfully submitted,

Charles C. Fulmer, M.D.

REPORT OF THE OUT PATIENT AND THE SOCIAL SERVICE DEPARTMENTS

I have the honor of presenting to you the Annual Report of the Out-Patient and the Social Service Departments for the year ending June 30, 1937.

During the past year, 1,294 new patient visits and 16,927 re-visits, a total of 18,221 visits, were made to the Out-Patient Department. 2,163 visits were made by patients authorized and paid for by the Federal, State and County Relief Associations. At the rate of 65¢ a visit, St. Luke's was paid \$1,405.95. The total cost of these patients to St. Luke's at our regular selling cost was \$1,762.05.

We are taking care of as many people as our quarters can accommodate. The Clinic rooms are small and the waiting rooms are not large enough to seat all.

2,935 Home visits were made by the Visiting Nurse. This year, a new car was purchased for the Out-Patient Department, the other car being turned in after three years service.

The Children's Birthday Fund provided 33½ days, 40 nights and 3 semi-special days nursing care to nineteen children, at a cost of \$588.00. Donations received totaled \$699.41. Balance in the Fund June 30, was \$381.20.

The Edward F. Gla ser Fund provided sixty-four patients with glasses, at a cost of \$210.01. Donations to the Fund totaled \$137.00. Grateful recipients, who later were financially able to reimburse the Fund, paid back \$76.88. Balance in the Fund June 30, was \$251.37.

In November 1936, a Cancer Clinic was begun under the supervision of Dr. Otto Pflueger. To date there have been twenty-eight visits made by twelve patients. Special observation for this type of patient outside the general Surgical Clinic provides a more efficient service, and is valuable from the statistical standpoint.

Dr. Russell Fletcher has been added to our Ear, Nose and Throat Staff.

Part of the Auditorium has been rented to the Visiting Nurses' Association as headquarters for their Mission Branch.

Since October 1936, the Student Nurses are having eight weeks training in the Out-Patient Department. This includes two hundred and sixty-four hours in the Clinics, under supervision of a Graduate Nurse; eight hours class work; sixteen hours agency visiting, and eight hours field trips supervised by our Public Health Nurse.

REPORT OF THE OUT PATTENT AND THE SOCIAL SERVICE I have the honor of presenting to you the Annual Report year ending Jume 30, 1887. Loring the past year, 1,296 new patient visits and 16,927 re-visits, a total of 16,221 visits, were made to the Out-Patient Department. 2,165 visits were made by patients authorized end paid for by the Federal, State and County Relief Associations. At the rate of 65d a visit, St. Like's was paid \$1.405.95. The total cost of these patients to St. Luke's at our regular selling cost was \$1,762.05. anitisw of t bas lists ers amoon statio ent .ejsbommoss ass . . . He thee of danors ental Jos ers enour 2.935 Home visits were nede by the Visiting Nurse. This year, a new cer was paredased for the Out-Fatlent separtment, the other car being furned in after three years service. The Uniterest Birtiklay Fund provided 338 days, 40

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We wish to thank our Supervisor, Dr. L. B. Coblentz, and the members of the Medical and Surgical Staff, for their kind counsel, cooperation and excellent services during the past year.

The Statistical Report shows the work accomplished.

Respectfully submitted,

MARGUERITE ZORIN, R.N., S.W. Acting Director of Social Service

Our Christmas Shoe Party was given again this year.
Two hundred children received shoes, toys, candy and los cream. Mr. A. Thuesen, through the courtesy of Buckingham cream when the sets represented bants Claus, and with his and heads, once again represented bants Claus, and with his three easistants made it possible for each child to have groperly if the shoes. Entertainment was furnished by Mr. Walter Cirl Scout Trop Wo. 5. The oandy was done ted by Mr. Walter Hass; the toys by the Emportum employes. The shoes and toe orean were purchased with money received from individual donations; \$200.00 being done ted by the late Mrs. Alexander Hamilton. Our Clinto children have lost a true and gracious friend in the passing of Mrs. Hamilton, who for the past seven years has made our Shoe Party possible. We wish to thank our Supervisor, Dr. L. B. Coblents, and the members of the Medicel and durgical Staff, for their kind counsel, cooperation and excellent services during the . TEST 7280 . De daligmoods work and a work stones lectifitates of Espectfully aubnitted,

REPORT OF THE OUT PATIENT DEPARTMENT

Year Ending June 30, 1937

| | | | yk yngangagangangan vagar regarantas vaga-valar saar reader regar reisteriense en | | |
|-------------------------------|---------------------|---------------------|---|--------|--------|
| CLINICAL VISITS | 1937 | 1936 | ADMISSIONS | 1937 | 1936 |
| Dermatology Gynecology | 582 822 | 522 784 | New Cases | 1,294 | 1,259 |
| Luetic Medical | 128 | 128 | Old Cases | 16,927 | 14,445 |
| Diabetic Rectal | 493 174 | 579 | HOSPITAL ENT | TRI ES | |
| Obstetrics Odontology | 652 231 | 469 215 | St. Luke's | 698 | 669 |
| Ophthalmology Orthopedics | 2328 782 | 2518 813 | Home Visits | 2,935 | 2,539 |
| Otorhinolarynology Urology | 1474 461 | 1524 | | | |
| Pedia trics Surgery | 3127 2923 447 | 2900 2624 155 | | | |
| Allergy Cancer | 28 | TOO | | | |
| | 18,221 | 17,096 | | | |

FINANCIAL REPORT

COLLECTIONS

| | 1937 | 1936 |
|----------------|------------|------------|
| Admission Fees | \$3,588.70 | \$2,895.75 |
| Dental | 84.95 | 88.80 |

THE THE CONTRACT THE SOLUTION THE TEST

| According to the case of a con- | | | | | |
|------------------------------------|----------------------------------|---|---|--|--|
| 1936 | 1932 | enorganida | 2591 | 1927 | OLIVIOAL VISTES |
| 1,259 14,445 14,445 2,539 | 25.86 25.86 25.86 368,8 | New Cases Old Cases HOSFITMI ENT St. Luke's Home Visits | 528 784 521 128 529 529 529 625 625 625 626 626 626 626 626 | 582 822 3569 3569 174 483 832 231 447 447 282 3127 447 282 447 282 447 282 447 | Dermatology Cynecology Lastic Lindical Diabetic Rectal Obstetrics Opstetrics Opstetrics Opstedics Orthogedics Oftonlinolarynology Loology Fediatrics Fediatrics Surgery Surgery Surgery Concer |

PERMITANCE AND REPORT

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enorroharo

A STATE OF THE STA

1937 1936 93,588.70 92,895.75 68.85 88.88

Admission Fees

Entirot

The Staff Men furnished \$42,538.00 worth of service for the year ending June 30, 1937, allowing \$100.00 for each major operation and \$50.00 for minor operations, Medical Service at \$30.00 per week, and Out-Patient hours at \$3.00 per hour.

This Service was furnished by:

Dr. Alanson Weeks Dr. G.D. Delprat Dr. Paul Castelhun Dr. A.H. Rosburg Dr. Otto F. Pflueger Dr. Harold P. Hill Dr. P.A. Taylor Dr. DeWitt K. Burnham Dr. William Kenney Dr. L.B. Coblentz Dr. J. Marion Read Dr. W.G. Moore Dr. W.H. Hill Dr. Albert Vollmer Dr. E.F. Anderson Dr. Bertram Stone Dr. George D. Lyman Dr. A.D. Sinclair

Dr. Howard Fleming
Dr. Dudley Smith
Dr. James W. Morgan
Dr. G.J. McChesney
Dr. R.L. Dresel
Dr. W.J. Cox
Dr. L.P. Player
Dr. P.A. Bonar
Dr. J.L. McCool
Dr. A.E. Edgerton
Dr. C.E.H. Bates
Dr. Russell Fletcher
Dr. M.G. LaPlace
Dr. A.D. Davis
Dr. W. Lawrence
Dr. W.L. Thomson
Dr. C. Malone
Dr. M. Botsford
Dr. W.P. Stowe

In Out-Patient Department

Dr. J.H. West Dr. A. Ferrante Dr. R. Morris Dr. H. Schussler Dr. M. Stallings Dr. R.H. Zumwalt The Staff Hen furnished \$42,538.00 worth of service for the year ending June 30, 1937, allowing \$100.00 for each major operation and \$50.00 for minor operations, Hedical Service at \$50.00 per week, and Out-Patient hours at \$5.00 per hour.

This Service was furnished by:

Dr. Alenson Weeks
Dr. G.D. Delgrat
Dr. Eaul Castelnun
Dr. A.H. Bosburg
Dr. Otto F. Frluegor
Dr. P.A. Taylor
Dr. Dawitt K. Burnham
Dr. Halliam Kenney
Dr. L.B. Coblemtz
Dr. W.G. Moore
Dr. W.H. Hill
Dr. E.F. Anderson
Dr. Bestiran Stone
Dr. Bertran Stone
Dr. Bertran Stone
Dr. George D. Lyman

Dr. Howard Fleming
Dr. Ludley Smith
Dr. James W. Morgan
Dr. G.J. McChesney
Dr. W.J. Cox
Dr. W.J. Cox
Dr. L.P. Fleyer
Dr. J.L. McCool
Dr. J.L. McCool
Dr. J.L. McCool
Dr. A.E. Edgerton
Dr. M.G. Larles
Dr. M.G. Larles
Dr. W.L. Thomson
Dr. W.L. Thomson
Dr. W.L. Thomson
Dr. W.L. Sotsord
Dr. W.F. Stowe

In Out-Patient Deportment

Dr. J.H. West Dr. A. Ferrante

Dr. H. Schuseler

. . . .

To the President and Board of Directors St. Luke's Hospital, San Francisco.

For the fiscal year beginning July first, Nineteen Thirty Six and ending June Thirtieth, Nineteen Thirty Seven, Chaplain begs to report that there were held eighty-four services as follows: Holy Communion celebrated eighteen times; Baptisms to the number of twelve; Evening Prayer fifty times; extra services four.

During the year the various clergy have used the Chapel and its equipment. Dr. Hodgkin and Canon Hayes have had services.

Messrs. Waldrop, Bullotti and Sperry gave an evening of music - a revial of an old commemoration service which for years they held in St. Luke's. Unfortunately the Chaplain was ill at the time. Kay Francis and Ione Walker also on separate occasions generously gave their service. Val Ritschey maintained his usual and high standard of music. On several evenings he gave instruction and drill to the Pupil Nurses, so that the repertoire of hymns has been enlarged. This might seem of little moment but with young women coming from all denominations - and from none at all - it is important to introduce new hymns. It is interesting to note that Nurses have asked for special prayer.

Respectfully submitted,

Henry Ohlhoff,
Ghaplain

To the Fresident and Board of Pirectors

For the fiscal year beginning July first, Mineteen Intry Strate Six and ending June Intrieth, Mineteen Intry Seven. Chaplein beas to report that there were held elghty-four services as follows: Holy Communion oslebrated elghteen times; Saptisms to the number of twelve; Evening Frayer Tifty times; extra services four.

used the Chapel and its equipment, Dr. Hodgkin and Canon Hayes have had services.

Mesers which to wears they hald to en pld commence then service which for years they hald in St. Luke's. Unfor the tell of the years they hald in St. Luke's. Unfor the tell of the years also on separate occasions
generously gave their slee on separate occasions
and rously gave their service. Yel Altsoney maintained his usual and high standard of music. On several
eventures he gave instruction and drill to the Fugil
forms of the two repertoure of hymps has been enfarmed. This might seem of little moment but with
yours women coming from all descents that the tron
forms at all - it is important to introduce now hymms.

It is interesting to note that harses have asked for
special prayer.

Respectfully submitted,

Henry Oblhoff,

ANNUAL REPORT OF THE WOMAN'S BOARD - 1936-1937

The Woman's Board of St. Luke's Hospital has met as usual on the second Friday of each month of 1936, with the exception of three months during the summer.

Again this year the most important work of the Board has been the Birthday Club. With Mrs. Harold Hill as Chairman, and a very active committee, the membership has continued to increase, until it is now well over two hundred. During the year seventeen cases were taken care of by the Fund.

At the suggestion of the Decorating Committee and other Board members, there have been a few changes and improvements in the hospital. The cubicles in the Wards have been painted, and new curtains hung; the hospital has been equipped with Ford beds except in the Wards, and more rawhide and iron furniture placed in the alcoves in the hallways.

In November a Nurses Training School Advisory Committee was created at St. Luke's, which includes in it's membership the Chairman of the Woman's Board and one other Board member.

It was voted in December that the Board visit the hospital twice a month instead of once a week as formerly. Two members are to visit together, and this way we feel that the same ends are accomplished with less inconvenience to the hospital personnel.

The Board has accepted with great regret this year the resignation of Mrs. Girvin, and has added to its membership Mrs. John Stephenson, Mrs. Allan Chickering, and Mrs. Noble's daughter, Mrs. Rudolph Samson.

Each year we take this opportunity to thank those with whom we come in contact in the hospital, for the unfailing generosity of their time and thoughts for us, as we continue in our efforts to be of assistance to the hospital as a whole.

Respectfully submitted,

Helen P. Dallas

ANNUAL REPORT OF THE WOMAN'S HOAFD - 1836-1937 The Woman's Roard of St. Luke's Hospital has net as usual on the second Friday of each more, of 1930, with the exception of three months during the summer. the Board has been the Sirtuary Club, With his. Earold hill as Chairmen, and a very active committee, the memberant has continued to increase, until it is now well over two nundred, Juring the rest seventeen has were taken care of by the Fund. At the suggestion of the mecorsting Committee

At the suggestion of the Decorating Consittes and other Board nambers, there have been a few chances and improvements in the incorpital. The orbitales in the wards have been painted, and new our tains hing; the hospital has been equipped with ford beds except in the wards, and more rewilds and from furniture placed in the alcoves in the hellways.

In Movember a Murses Training School Advisor; Committee was created et St. Luke's, which includes in 10's membership the Chairman of the Women's Board and one other Board member.

the board ent tent rednessed at betov as will the hospital twice a month instead of once a week os romerly. Two members are to vit to to to amb ent that the same ents are accomplished with less inconventence to to hospital personnel.

The Board has accepted with great regret this year to resignation of Mrs. Cirvin, and has edded to its membership Mrs. John Stephenson, Mrs. Allan Chickering, and Mrs. Hoble's daughter, Mrs. Rucolph Senson.

Each year we take this opportunity to thenk those with whom we come in contact in the hospital, for the unfailing generosity of their time and thoughts for us, as we continue in our efforts to be of assistance to the nospital as a whole.

Respectfully submitted,

Helen F. Dallas

MEMORIAL DONATIONS TO ENDOWMENT FUNDS For the Year Ending June 30, 1937

| Adams, Mr. and Mrs. Glenn, and Glenn, Jr. Alexander, Mrs. and Mr. T.A. Alexander, S.L., Henry and Jewel and Mr. and Mrs. Leon M. Rosenberg | \$ 3.00 2.50 5.00 |
|---|--|
| Allen Allen, Mrs. Ruth All Saint's Women's Guild, S.F. All Saint's Guild, Watsonville All Soul's Church Choir, Berkeley All Soul's Service League, " Armsby, Mrs. J.K. | 13.00 9.00 5.00 5.00 6.75 27.50 |
| Bailey, Mr. Jos. Bakewell, Mr. Walter and the Misses Baldwin, Mrs. A.S. Bates, Mrs. Gladys Benson, Mrs. Harry C Bigelow, Miss Natalie Boardman, Mrs. S.H. Boardman, Mr. T. Danforth Brown, The Misses Brown, Miss Grace Brown, Mrs. Laurence Clay Buchanan, Mrs. A.N. Bunting, Mrs. Fleda O. Burnett, Mrs. G.W. Byrnes, Ruth G. | 15.00 3.00 15.00 1.00 5.00 4.00 10.00 5.00 10.00 25.00 10.00 18.50 5.00 10.00 |
| Cambron, Mrs. Carroll Carolan, Miss Emily Casserly, Miss Margaret Chalmers, Helen A. Church of St. John the Evangelist Cockcroft, Mrs. W.E. Coffin, Mrs. James Collier, The Misses Conolley, Lulu E. Copeland, Margaret | 2.50 5.00 20.00 7.00 5.00 1.50 25.00 5.00 2.00 |
| Dallas, Dr. Donald and Dr. Henry A. Stephenson Davies, Gertrude M. Dibblee, Mr. and Mrs. B.H. Dickey, Dean R. Drown, Miss V.N. Drown, Mr. Willard Du Four, Alfred and Marion | 5.00 7.00 25.00 5.00 15.00 15.00 2.50 |
| Easton, Louise A. and Louis A. Ward Ellis, Norman P., Mr. and Mrs. El Pajaro Theatre Co., Watsonville | 5.00 5.00 7.50 |

MEMORIAL DOMATIONS TO ENDOWMENT FUNDS

| | Adams, Mr. and Mrs. Clenn, and |
|--------|--|
| 00.5 8 | Glenn, Jr. |
| 2,50 | Alexander, Mrs. and Mr. T.A. |
| 5.00 | Alexander, S.L., Henry and Jewel |
| | and Mr. and Mrs. Leon M. Rosenberg |
| | All Saint's Women's Guild, S.T. All Saint's Guild, Watsonville All Soul's Church Choir, Berkeley |
| | All Saint's Women's Guild, S.F. |
| | allivnosis duild, Vatsonville |
| 00,0 | All Soul's Church Choir, Berkeley |
| 67.8 | |
| | Armsby, Mrs. J.K. |
| | |
| | Bailey, Mr. Jos. |
| | Bakewell, Mr. Walter and the Misses |
| 15,00 | Baldwin, Mrs. A.S. |
| | Bates, Ars. Gladys |
| | Benson, Mrs. Herry C |
| 4.00 | Bigelow, Miss Matalie |
| 10,00 | Boardman, Mrs. S.H. |
| | Boardman, Mr. T. Danforth |
| 10,00 | Brown, The Misses |
| | |
| | Brown, Mrs. Laurence Clay |
| | Buchanan, Mrs. A.M. |
| 18,50 | Bunting, Mrs. Flada O. |
| 00.8 | Burnett, Mrs. C.W. |
| 10.00 | Byrnes, Ruth G. |
| | |
| od.s | Cambron, Mrs. Carroll |
| 5,00 | |
| 00,08 | |
| 9,,00 | Chalmers, Helen A. |
| | Church of St. John the Evangelist |
| 1.80 | Cockeroft, Mrs. W.E. |
| 00.68 | Coffin, Mrs. James |
| 5,,00 | Collier, The Misses |
| 00.8 | Conolley, Lulu E. |
| | Copeland, Margaret |
| | Dallas, Dr. Donald and Dr. Henry A. Stephenson |
| 7.00 | Davies, Certrade M. |
| 25,00 | Dibblee, ifr. and Mrs. B.H. |
| 5,00 | |
| 15.00 | Drown, Miss V.W. |
| 15.00 | Drown, Mr. Willard |
| 08.8 | Du Tours Alfred and Harton |
| OU & D | |
| 5,00 | brew . aluci bns . A estudi enojasa |
| 00.0 | Ellis, Norman D., Mr. and Mrs. |
| 7.50 | Al Pajaro Theatre Co., Watsonville |
| | |

| Fitzgerald, Mrs. Mabel | \$ 2.00 |
|---|---|
| Gardiner, Mrs. F.H. Gibbs, The Misses Glover, Dr. Mary, and Friends of Mrs. Nichols Greene, Mr. and Mrs. Crawford Griffith, Miss Alice Guild of St. Barnabas for Nurses | 6.00 5.00 30.00 15.00 10.00 |
| Hall, Mr. and Mrs. Edward A. Hall, James L. Hare, Mrs. Chester Hayne, Mrs. Wm. Alston Heath, Misses Sarah R. and Virginia Hellman, Mrs. Horatio Hobart, John Holden, Lilliam M. Holden, Milward Holden, The Misses Hooker, Mrs. Osgood and Osgood Hooker, Jr. House of Churchwomen, Diocese of California | 5.00 5.00 1.50 30.00 2.50 5.00 1.00 2.00 2.00 25.00 13.00 |
| Jackson, Mr. and Mrs. H.R. Johnston, Dr. Howard Jory, Mr. and Mrs. S.L. Josselyn, Miss Marjorie G. | 2.50 5.00 3.50 7.50 |
| Langhorne, Mrs. James P. Lansdale, Mrs. Philip Lee, Mrs. Hamilton Livermore, Mr. Norman B. Lucas, Mrs. Wm. Palmer Luke, Miss Kathleen, Messrs. Thomas and Gordon, and Jessie A. Hay | 25.00 10.00 10.00 10.00 3.00 |
| Manners, Mr. and Mrs. C.H. Maria Kip Orphanage Mason, Mrs. J. B. Mel, The Misses Mitchler, Mrs. Alfred G. Monteagle, Mr. and Mrs. Kenneth Monteagle, Mr. Louis F. Murphy, Mrs. J.B. | 1.00 5.00 1.00 4.00 3.00 10.00 40.00 7.00 |
| McLeish, Mr. and Mrs. Archibald L. | 10.00 |
| Nichols, Mrs. W.F. Noble, Gen. and Mrs. R.H. Nokes, Mrs. N.L. | 5.00 7.50 8.00 |
| Partridge, Mrs. Harry Parsons, Rt. Rev. E.L. and Miss Harriet Pfingst, Mr. and Mrs. Edward P. Pfingst, Mrs. Florence P. Pickering, Mr. and Mrs. G.W. | 4.00 5.00 10.00 6.00 2.00 |

| | Fitzgerald, Mrs. Mabol |
|---|---|
| 5.00 5.00 30.00 15.00 10.00 | Cardinar, Mrs. F.H. Cibbs, The Misses Clover, Dr. Mary, and Friends of Mrs. Michols Creams, Mr. and Mrs. Crawford Criffith, Miss Alice Cuild of St. Barmabas for Nurses |
| 5.00 1.50 30.00 2.50 5.00 1.00 2.00 2.00 2.00 2.00 2.00 | Hall, Mr. and Mrs. Edward A. Hall, James L. Hall, James L. Hayne, Mrs. Wm. Alston Heath, Misses Sarah R. and Virginia Hellman, Mrs. Horatio Holden, Lilliam M. Holden, Lilliam M. Holden, Milward Holden, The Misses Holden, The Misses Holden, The Misses Hooker, Mrs. Osgood and Osgood Hooker, Jr. House of Churchwomen, Diocese of California |
| 08.8 00.8 08.8 08.8 | Jackson, Mr. and Mrs. H.R. Johnston, Dr. Howard Jory, Mr. and Mrs. B.L. Josselyn, Miss Marjorie G. |
| 25.00 10.00 10.00 10.00 0.00 | Langhorne, Mrs. James P. Lansdale, Mrs. Philip Lee, Mrs. Hamilton Livermore, Mr. Morman B. Lucas, Mrs. Wm. Palmer Lucas, Mrs. Wm. Palmer Lucas, Miss Mathleen, Mesars. Thomas and Gordon, and Jessie A. Hay |
| 1,00 5,00 1,00 4,00 1,00 2,00 40,00 7,00 | Manners, Mr. and Mrs. C.H. Maria Kip Orphanage Mason, Mrs. J. B. Mel. The Misses Mitchler, Mrs. Alfred G. Monteagle, Mr. and Mrs. Kenneth Monteagle, Mr. Louis F. Murphy, Mrs. J.B. |
| 10,00 | Holetsh, Mr. and Mrs. Archibeld L. |
| 5.00 7.50 8.00 | Michols, Mrs. W.F. Noble, Gen. and Mrs. R.H. Nokes, Mrs. N.L. |
| 4.00 5.00 10.00 6.00 2.00 | Partridge, Mrs. Harry Parsons, Rt. Rev. E.L. and Miss Harriet Pringst, Mrs. and Mrs. Edward P. Pringst, Mrs. Florence P. Piokering, Mrs. and Mrs. C.W. |

| Porter, Mr. and Mrs. John E. Porter, John T. and Co. Porter, Mrs. M.C. Porter, Mrs. Warren R. Potter, Mrs. Ashton H. Robinson, Mr. and Mrs. G.E. | \$ 5.00 5.00 12.50 12.50 2.00 |
|--|--|
| St. Elizabeth's Guild and Woman's Auxiliary, Grace Cathedral St. James Episcopal Church, Women's Aux., S.F. St. James Guild, Centerville St. James Church, "The Men's Club St. Luke's Branch, Daugher's of the King St. Luke's Hospital, Women's Board St. Mark's Guild & Woman's Auxiliary, Berkeley St. Paul's Church School Chapter, Oakland St. Peter's Church Auxiliary Guild, " St. Peter's Church Guild and Auxiliary, S.F. Schuchard, Mr. and Mrs. A.O.W. Scurich, Stephen Sherman, Mrs. Harry M. Skewes-Cox, Mrs. Vernon Smith, Eva H. and Elva S. Ames State Bar of California, Board of Governors Stealey, Mrs. John and Family Stanton, Mr. and Mrs. Lewis E. Stoney, Miss Kate Stuart, Josephine Swinerton, Mr. and Mrs. Alfred | 10.00 4.00 4.50 2.50 7.00 20.00 8.00 1.00 2.00 5.00 9.00 10.00 2.00 15.00 5.40 6.50 10.00 4.00 67.50 |
| Thayer, Miss Gladys I. Trinity Auxiliary, San Jose Trinity Guild, San Jose | 4.00 3.00 1.50 |
| Walker, Mr. and Mrs. Willis J. and Leon Brooks Walker Waterman, Miss E.S. Wheaton, Mrs. George Winslow, Mrs. Sarah S. Women's Auxiliary, California Branch, Diocese of California | 4.50 5.00 2.50 10.00 |
| Woodson, Mr. and Mrs. W.N. Wright, Mrs. J.B. Wright, Mr. T.M. | 4.50 5.00 5.00 |
| Zihn, Clara and Elizabeth | 4.00 |

| | Porter, Mr. and Mrs. John E. |
|--|--|
| 00.8 | Porter, John T. and Co. |
| | Forter, Mrs. M.C. |
| oa.sr . | Porter, Mrs. Warren R. |
| 00.8 | Potter, Mrs. Ashton H. |
| | Ser stanting Satur Standar |
| 5,00 | Robinson, Mr. and Mrs. C.I. |
| | essen sorm wing eyn finonitana |
| | of word for Street with the control of |
| | St. Elizabeth's Guild and "onan"s |
| | Auxiliary, Grace Cathedral |
| OU KE / | St. James Episcopel Church, Women's Aux., S.F. |
| 4.50 | St. James Gaild, Centerville |
| 02.8 | St. James Church, " The Men's Club |
| . 7.00 | St. Luce's Branch, Daugher's of the King |
| 00.03 | St. Luke's Hospital, Women's Board |
| 00.8 | St. Mark's Cuild & Women's Auxiliary, Berneley. |
| 1.00 | St. Paul's Church School Chapter, Carland |
| | St. Peter's Church Auxiliary Guild, " |
| 00.8 | St. Feter's Church Guild and Auxiliary, S.F. |
| . 5.00 | Schuchard, Mr. and Mrs. A.O.M. |
| | Sourich, Stephen |
| 00.9 | Sherman Lrs. Harry M. |
| . 10.00 | Sherman, irs, Barry M. Skewes-Cox, Mrs. Vernon |
| | Smith Eva H. and Alwa S. Ames |
| | Smith, Eva H. and Alva S. Ames State Sar of California, Board of Governors |
| | Stealey, Mrs. John and Panily |
| | Stanton, Mr. and Mrs. Lewis L. |
| 00.01 | Stoney, Miss Kate |
| 00.4 . | Steart, Josephine |
| . 67.50 | Swinerton, Mr. and Mrs. Alfred |
| | now a determ a to the state of the galler of 2011 to the |
| | Theyer, Miss Cladys I. |
| 00.8 | Authority and a series of the control of the contro |
| 1.50 | Trinity Auxiliary; San Jose Trinity Guild; San Jose |
| Service and the service and th | Dena Ima frittin Activity |
| | |
| | Walker, Mr. and Mrs. Willis J. and Leon Brooks Walker |
| 00*3 | |
| | Wheaten, Miss E.S. Wheaten, Mrs. George |
| 00.80 | wheelon, its ceatee |
| UUAUA | ATUSTON, WISH DE LEU D' |
| an ar | Momen a marriable and anomal account |
| 10.00 | Winslow, Mrs. Serah S. Women's Luxiliary, California Branch, Diocese of California |
| 4.50 | woodson, Mr. and Mrs. W.W. |
| . 5.00 | Wright, Mrs. J.B. |
| | Wal and anglew |
| | |
| | Zihn, Clara and Elizabeth |
| | |

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REPORT OF THE DEPARTMENT OF MEDICAL RECORDS

The following report of Medical Statistics for the year ending June 30, 1937, covers the diseases treated on 5774 cases discharged.

DEPARTMENTAL WORK BY SERVICE

| Department | Cases Treated |
|-------------------------|---------------|
| Medicine | |
| General Medicine | 1215 |
| Pediatrics | 524 |
| Psychiatry | 28 |
| Dermatology | 5 |
| | 1772 |
| Surgery | |
| General Surgery | 1620 |
| Genito-urinary | 452 |
| Gynecology & Obstetrics | 851 |
| Orthopedic | 391 |
| Otorhinolaryngology | 802 |
| Eye | 103 |
| | 4219 |
| | |

On July 1, 1936, the Standard Classified Nomenclature of Disease was installed in the Record Department, since which time, all diagnoses have been written in strict accordance to this book, and coded according to the number system.

This nomenclature has been approved by 21 Medical Organizations and 16 Medical Schools, and has been adopted by over 500 Hospitals in the United States and Canada. Its purpose is to facilitate collecting general statistics, which, up to the present time, have been unavailable, and to force the Doctors to write their diagnoses accurately and completely.

Each Monday afternoon during the past year the Record Librarian has held a session with the Assistant Residents, for the purpose of aiding them in coding the diagnoses and using the proper terminology. A review of the records indicates that this procedure has been successful. There is marked improvement in the diagnoses which meet the necessary requirements by stating, in every case, the exact location of the disease, together with its etiology.

As all diagnoses are indexed according to the code number of the disease, an ALPHABETICAL list is submitted for your approval.

Genevieve Clark Hirschler, Record Librarian

REPORT OF THE DEPARTMENT OF INDICAL HECORDS

The following report of Medical Statistics for the year ending June 30, 1937, covers the diseases treated on 5774 cases discharged.

DEPARTMENTAL VORK BY SERVICE

| Dases Treeted | Department Jedicine |
|---------------|--------------------------|
| 1218 | General Medicine |
| | Pediatrics Psychiatry |
| 29 2772 | Dermatology |
| 2441 | Surgery |
| | General Surgery |
| | Genito-urinary |
| | Gynecology & Obstetrics |
| 391 | |
| 808 | |
| 103 | |

On July 1, 1936, the Standard Clessified Nomenclature of Disease was installed in the Record Department, since which time, all diagnoses have been written in strict accordance to this book, and coded according to the number system.

This nomenolature has been approved by 21 Medical Organizations and 16 Medical schools, and has been edopted by over 500 Mospitals in the United States and Canada. Its purpose is to facilitate collecting general statistics, which, up to the present time, have been unavailable, and to force the Doctors to write their disgnoses accurately and completely.

Each Monday afternoon during the past year the Record Librarian has held a session with the Assistant Record Librarian has held a session with the Assistant Residents, for the purpose of aiding them in coding the disgnoses and using the proper terminology. A review of the records indicates that this procedure has been successful. There is marked improvement in the disgnoses which meet the necessary requirements by stating, in every case, the exact location of the disease, together with its etiology.

As all disgnoses are indexed according to the code number of the disease, an ALFHABETICAL list is submitted for your approval.

Genevieve Clark Hirschler, Record Librarian

SUMMARY OF DIAGNOSES

| | 34 |
|---------------------------------------|-------|
| Abortions | 30 |
| Abrasions | 67 |
| Absonged | 147 |
| Absence. congenital of Parts | 5 |
| Achlorhydria | 4 |
| Acidosis | 1 |
| Acne Vulgaris | 1 |
| Actinomyosis | 4 |
| Addictions | 14 |
| Adeno-carcinoma | 54 |
| Adenofibroma | 16 |
| Adenomyoma | 3 |
| Adherent pericardium | 1 |
| Adherent placenta | |
| Adhesions | 64 |
| Alcoholism | 52 |
| Amblyopia | 1 |
| Amoutation-stump (abnormal) | 6 |
| Amputation, traumatic | 4 |
| Amyloidosis | 1 |
| Ancylostomiasis | 140 |
| Anemia | 1 |
| Aneurysm | 4 |
| Angioneurotic edema | 1 |
| Angiospasm | 1 2 |
| Angulation of Ureter | 1 |
| Ankyloglossia | 10 |
| Ankylosis | 1 |
| Anteflexion of Uterus | 6 |
| Anxiety Hysteria | 344 |
| Appendicitis | 70 |
| Arteriosclerosis | 75 |
| Arteriosclerotic Heart Disease | 103 |
| Arthritis Asthenia, neuro-circulatory | 14 |
| Asthma | 43 |
| Atelactasis | 5 |
| Atony of Colon | 4 |
| Atresia, congenital | 8 |
| Atrophy of Endometrium | 1 |
| Auricular Fibrillation | 2 |
| Auricular Flutter | 1 |
| Avitaminosis | 3 |
| Avulsion | 4 |
| Bacteremia | 12 |
| Balanitis | 1 |
| D 11-7-initia | 1 1 2 |
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| | Bromohisetasis |
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| Bronchitis | 36 |
|--|-----|
| Broncho-pneumonia | 79 |
| Bundle-Branch Block | 2 |
| Burns | 50 |
| Bursitis | 22 |
| Calculus | 56 |
| Callositas | 1 |
| Carbuncle | 9 |
| Carcinoid of Appendix | 1 |
| Carcinoma | 164 |
| Cardiospasm | 4 |
| Caries of Teeth | 8 |
| Carotinemia | 1 |
| Caruncle of Urethra | 1 5 |
| Cataracts | 37 |
| Causalgia | 1 |
| Cellulitis | 24 |
| Cervicitis | 28 |
| Cholangibis | 3 |
| | 85 |
| Cholecystitis | 77 |
| Cholelithiasis | |
| Cholesterol Imbibition of Gall Bladder | 1 2 |
| Chondroma | 1 |
| Chorea | 1 |
| Cicatrix | 8 |
| Cirrhosis | 4 |
| Cleft Palate | 15 |
| Colitis | 131 |
| Common Cold | 7 |
| Compression of Nerve | 38 |
| Concussion | 7 |
| Conjunctivitis | 4 |
| Constipation | 2 |
| Constrict ions | 9 |
| Contractures | 135 |
| Contusions | |
| Convalescence, post-operative | 20 |
| Cor triloculars biventricularis | 87 |
| Cord about neck | |
| Coryza | 8 2 |
| Crush | |
| Cysts | 130 |
| Cystadenoma | 16 |
| Cystic Breast | |
| Cystitis | 44 |
| Cystocele | 17 |
| Dacryocystitis | 1 |
| Deafness | 3 |
| Defect. congenital, ectodermal | 1 |
| Deformities, congenital | 31 |
| Degeneration | 5 |
| Dehiscance of Operation Wound | 4 |
| Delirium Tremens | 2 |
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| 38 | Brononitis althonors |
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| 88 | VIOLOGY SEL LLS |
| 44 | Cholelithiasis StarintleLond |
| * | Cholesterol Imbibition of Gall Bladder |
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| 1 | VICEBILE CARREST STATES OF THE |
| . 8. | Cirrhosia |
| | Cleft Palate stalet their |
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| 131 | |
| | COMMON CO. C. |
| 24 | Compression of Werve Oving To notsesigno |
| | Concussion |
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| | Constructions ************************************ |
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| Dementia Precox | 2 |
|-------------------------------|-----|
| Dermatitis | 6 |
| | 5 |
| Dermoid | 14 |
| Detachments | - |
| Deviation of Septum | 42 |
| Diabetes Mellitus | 75 |
| Diagnosis Deferred | 19 |
| Diarrhea | 4 |
| Dilatations | 7 |
| Disease, Buerger's | i |
| | 3 |
| Disease, Hodgkins | 13 |
| Disease, None | |
| Disease, Undiagnosed | 6 |
| Dislocations | 40 |
| Disorders of Dentition | 1 |
| Displacements | 2 |
| Diverticulitis | 11 |
| Diverticulosis | 22 |
| Ducdenitis | 3 |
| Dycrasia, endocrine | 2 |
| Dycrasia, endocrine | 1 |
| Dysfunction, ovarian | 3 |
| Dysmenorrhea | 3 |
| Dystrophy, adiposo-congenital | 1 |
| Echinococcosis, hepatic | 2 |
| Eclampsia | 3 |
| Ectasia of Cornea | 1 |
| Ectopic Pregnancy | 9 |
| Eczema | 4 |
| Edema | 7 |
| The marking of Hands | i |
| Elongation of Uvula | 14 |
| Embolism | 4 |
| Emphysema | |
| Empirema | 12 |
| Encephalitis | 2 |
| Encephalopathy | 1 |
| Endocarditis | 5 |
| Endometriosis | 10 |
| Endometritis | 39 |
| Endothelioma | 7 |
| Enteritis | |
| Interiors | 3 3 |
| Entero-colitis | 3 |
| Enteroptosis | 1 |
| Entropion | |
| Epididymitis | 12 |
| Enilancy | 16 |
| Eniphyseolvsis (Ilium) | 1 |
| Enistavis | 7 |
| Erosion of Cervix | 3 |
| Erysipelas | 6 |
| Trysiperas | 5 |
| Erythema | 17 |
| Esophoria | 3 |
| Examination Only | 3 |
| Exhaustion | 0 |
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| | Exhaustion |
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| Exophoria | 4 |
|-----------------------------|-----|
| Exostosis | 6 |
| | |
| False Labor | 11 |
| Fatty Liver | 1 |
| Fecolith in Appendix | 2 |
| Fever of Unknown Origin | 4 |
| Fibroma | 6 |
| Fibromyoma (Uterine) | 90 |
| Fibrosis | 30 |
| | |
| Fissure | 46 |
| Fistula | 33 |
| Folliculitis | 1 |
| Food Allergy | 5 |
| Foreign Body | 30 |
| | 411 |
| Fractures | |
| Gtorlivh's Syndrome | 1 |
| Furuncle | 16 |
| Gangrene | 10 |
| Gastritis | 6 |
| Gastro-enteritis | 35 |
| Generally Contracted Pelvis | 9 |
| Generally contracted relvis | 7 |
| Giant-Cell Tumor of Finger | 1 |
| Gingivitis | 3 |
| Glaucoma | 10 |
| Glomerulo-nephritis | 14 |
| Glossitis | 1 |
| Goiter | 13 |
| | |
| Granulocytopenia | 1 |
| Granuloma of Tongue | |
| Hallux Valgus | 10 |
| Hammer Toe | 1 |
| Harelip | 6 |
| Heart Disease (undiagnosed) | 5 |
| neart bisease (unulagnosed) | 3 |
| Hemangioma | 7 |
| Hematemesis | 1 |
| Hematocele | |
| Hematoma | 24 |
| Hematosalpinx | 1 |
| Hematuria | 6 |
| Hemorrhage | 71 |
| Hemorrhage | 54 |
| Hemorrhoids | |
| Hepatitis | 5 |
| Hernia | 195 |
| Herniation | 10 |
| Herpes Zoster | 3 |
| Tid popular accounts | 2 |
| Hiccough | 13 |
| Hydrocele | |
| Hydronephrosis | 12 |
| Hydrons of Gall Bladder | 2 |
| Hydrosalning | 5 |
| Hydro-ureter | 2 |
| Three real lambard with | 4 |
| Hyperchlorhydria | ī |
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| | Aydrosalpinx |
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| Hypernephroma of Kidney | 2 |
|--|-------|
| Hyperphoria | 1 |
| Hyperplasia | 29 |
| Hypertensive Cardio-Vascular Disease | 83 |
| Hypertensive Vascular Disease | 48 |
| Hyperthyroid Heart | 1 |
| Hype rthyroidism | 5 |
| Hypertrophy | 500 |
| Hypertropia | |
| Hypothiopia | 2 |
| Hypochlorhydria | 1 |
| Hypospadias | |
| Hypothyroidism | 11 |
| Hysteria | 4 |
| Icterus | 7 |
| Idiopathic Convulsive State | 2 |
| Ileitis | 3 |
| Ileus, paralytic | 3 |
| Impacted Feces | 4 |
| Impacted Tooth | 6 |
| Impairment, post-operative | 1 |
| Impairment, post-traumatic | 2 |
| Impetigo | 11 |
| Improper Feeding | 1 1 |
| Inanition | 1 |
| Incontinence of Sphincter ani | 1 |
| Induration, post-traumatic | 2 |
| Infantile Uterus | 1 |
| Infarction | 12 |
| Infections, unspecified | 5 |
| Inflammations, unspecified | 26 |
| Influenza | 39 |
| Ingrowing Nail | 5 |
| Instability, post-traumatic | 1 |
| Intussusception | 1 |
| Inversion of Uterus | 1 |
| Involutional Melancholia | 2 |
| Iritis | 1 |
| Irritability of Colon | 53 |
| Irritation (due to tape) | 1 |
| Jackson's Veil | 1 |
| Jaundice | 1 |
| Deloid | 2 |
| Keratitis | 2 |
| Kink | 2 |
| Kraurosis | 1 |
| Labyrinthitis | 4 |
| Laceration | 79 |
| Laryngitis | 9 |
| Le iomyoma | |
| Leptomeningitis | 2 1 5 |
| Leukemia | 5 |
| Leukoplakia | 1 |
| Lipoma | 14 |
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| | Hypernephrona of Midney |
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| | Hyperphoria |
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| | Hypertensive Vascular Disease |
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| Loose Body in Joint | 2 |
|--|----|
| Loss of Tissue, post-traumatic | 2 |
| Tions of Transfe, hos and administration | ĩ |
| Lumbago | |
| Lumbago Luxation, traumatic (lens) | 1 |
| Lymphadenitis | 58 |
| T | 1 |
| Lympadenopathy | |
| Lymphangitis | 30 |
| Lymphogranuloma inguinale | 1 |
| Lymphogranulomatosis | 3 |
| | 1 |
| Lymphoma | |
| Lymphosarcoma, inguinal | 1 |
| Malnutrition | 2 |
| Malta Fever | 2 |
| | |
| Manic Depressive Psychoses | 2 |
| Mastitis | 12 |
| Mastoiditis | 15 |
| | 5 |
| Median Bar | |
| Megacolon | 1 |
| Melanoma | 2 |
| Melanosarcoma | 1 |
| | 2 |
| Meniere's Syndrome | 2 |
| Meningismus | 1 |
| Meningitis | 2 |
| Menopause | 17 |
| Menopause | 9 |
| Menorrhagia | |
| Mental Deficiency | 3 |
| Metritis | 8 |
| Metorrhagia | 2 |
| Metorriagia | ĩ |
| Microcephaly | |
| Migrane | 3 |
| Mixed Neoplasm | 3 |
| Mononucleosis | 4 |
| MOHOHOCEOSES | 1 |
| Monster | i |
| Myelitis, transverse | |
| Myocarditis | 3 |
| Myositis | 45 |
| NAY OST 0 TS | 1 |
| Naevus pigmentosus | |
| Necrosis | 2 |
| Neoplasm, suspected, of Brain | 3 |
| Neoplasm, undiagnosed | 10 |
| Neopidam, didiagnosod | 7 |
| Nephroptosis | 15 |
| Nephrosclerosis | |
| Nephrosis | 2 |
| Nervous Vomiting | 1 |
| Transport of the control of the cont | 14 |
| Neuralgia | 11 |
| Neurasthenia | |
| Neuritis | 35 |
| Neuro-fibroma | 1 |
| Medito-Tipionid | 3 |
| Neuroma | |
| Neurosis | 16 |
| No Disease (Vas Deferens) | 2 |
| Non-rusion of Verbetrae | 2 |
| MON-Lasion of Astrentae | ~ |

| Loose Body in Joint ************************************ |
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| Loss of Tissue, post-traumatic |
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| ARREST OF STREET |
| Luxation, traumatic (lens) |
| Lymphodenities accessors |
| Lympadenopathy visual same same |
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| Necrosia |
| Neoplasm, suspected, of Brain |
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| Nephroptosis assessessessessessessesses |
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| No Disease (Vas Deferens) |
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| | Obesity | 3 |
|---|-------------------------------------|--|
| | Obstruction | 32 |
| | 0-2 | |
| | Occlusion | 3 |
| | Odontoma | 1 |
| | Opacity, corneal | 1 |
| | Orahitia | |
| | Orchitis | 1 |
| | Osteoarthropathy | 1 |
| | Osteochondritis | 3 |
| | Osteoma | 1 |
| | Objecting | and the fact and the party of |
| | Osteomyelitis | 24 |
| | Osteoporosis | 1 |
| | Otitis media | 29 |
| | OOTOTO MONTO | |
| | Oxyuriasis | 1 |
| | Pancreatitis | 4 |
| | Papilloma | 8 |
| | Domalraia | The second secon |
| | Paralysis | 8 |
| | Parametritis | 2 |
| | Paraphimosis | 2 |
| | Parathyphoid | ĩ |
| | | |
| | Paresis, general | 3 |
| | Paronychia | 6 |
| - | Parotitis | 4 |
| | Desire Constitution of Trans | |
| | Passive Congestion of Heart | 1 |
| | Pectenosis | 58 |
| | Pediculosis pubis | 1 |
| | Pemphigus acutus | ī |
| | Tempirigus acutus | |
| | Perforation of Septum | 2 |
| | Periappendicitis | 1 |
| | Pericarditis | 3 |
| | | 2 |
| | Periostitis | |
| | Peritonitis | 23 |
| | Periureteritis | 1 |
| | Permicious Vomiting of Pregnancy | 7 |
| | | |
| | Petit mal | 4 |
| | Pharmygitis | 3 |
| | Phimosis | 181 |
| | | |
| | Phlebitis | |
| | Phlegmasia Alba Dolens | 1 |
| | Phobia | 1 |
| | Placenta Previa | 7 |
| | | |
| | Pleural effusion | 4 |
| | Pleurisy | 10 |
| | Pneumonia | 36 |
| | | |
| | Pneumothorax | 8 |
| | Poisoning | 74 |
| | Poliomyelitis | 5 |
| | Dolaroratio Vidnora | 4 |
| | Polycystic Kidneys | |
| | Polyhydramnios | 1 |
| | Polypus | 25 |
| | Post-traumatic Personality Disorder | 2 |
| | Dra colemnaio | 1 |
| | Pre-eclampsia | |
| | Pregnancy, ectopic | 8 |
| | Pregnancy, delivered | 379 |
| | Pregnancy, undelivered | 30 |
| | Tropingion, | 00 |
| | | |

| | Obesity williams |
|-------|--|
| 9.70 | Obstruction noficertado |
| | Occlusion notsuloso |
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| ala . | Orelated |
| | Ogtoppertimentities |
| | Osteochondritis |
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| | SANAMATAN SANAMAN SANAMAN STATIS AND SANAMAN S |
| | ************************************** |
| es. | ALBERTA MODEL OF THE PROPERTY |
| 1. | ****** SIRILIVIXO |
| 1 | Pandreatitie Billearnia |
| | Papillomi secretarionessecretariones |
| | Paralysis slavisment |
| | Parametritis sitirtemereq |
| | Peraphimosis |
| | Parathyphoid |
| | Paresis, ceneral |
| 0 | Paronyohia |
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| de · | Peotenosia |
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| ε. | Perionrells |
| s. | Periostitls |
| 83 | Peritonitis |
| I. | Periureteritis |
| 7 | Permissions Voniting of Pregnancy |
| 2 | Petit mal Inm tite? |
| | Pharmynitis |
| | Phimosts |
| 151 | Phiebitis |
| | Phiegmasta Alba Dolens |
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| 4 | |
| TOTAL | Placenta Previe |
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| | Pleuriayvariation |
| | Pneumonia |
| 8. | Pasumother ax |
| 74 | MINGEO'S |
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| 4. | EVENDER DESCRIPTION OF THE PROPERTY OF THE PRO |
| L | |
| 8 | Polygus Personality Disorder |
| S | Post-tfruentic Persons ity Discreter |
| I. | |
| | Pragminey, editonic |
| 8 | Pregnancy, estopic |
| . 643 | Pregnancy, undelivered |
| | SASSASSASSASSAS NOTOATYONED SANTONED |
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| Premature birth | 17 |
|--|--|
| | |
| Premature delivery | 5 |
| Presentations Breech | |
| Prooch | 18 |
| Dreech | |
| Transverse | 2 |
| Vertex | 392 |
| | 17 |
| Prolapse | |
| Proliferation | 4 |
| Proptosis of Eyeball | 1 |
| | COLUMN TANKS |
| Prostatitis | 22 |
| Pruritis | 8 |
| | 2 |
| Psoriasis | |
| Psychoneurosis, unspecified | 4 |
| Psychopathic personality | 4 |
| Tay on open unite personal toy | 8 |
| Psychoses | |
| Pterygium | 1 |
| Purpura | 5 |
| rarhara | |
| Pyelitis | 63 |
| Pyelonephritis | 6 |
| Pylephlebitis | 7 |
| LATEBUTEDIOTS | 1 3 |
| Pylorospasm | 0 |
| Pyometra | 1 |
| Pyonephrosis | 3 |
| ryonephrosis | 12 |
| Pyorrhea alvelaris | |
| Pyosalpinx | 4 |
| Reaction, following transfusion of blood | 1 |
| reaction, fortow mig transfusion of proor | A CONTRACTOR OF THE PARTY OF TH |
| Rectocele | 25 |
| Redundant Prepuce | 8 |
| Redundant tissue of Eyelid | 1 |
| | |
| Refracture of Patella | 1 |
| Relaxation of Perineum | 7 |
| Retention of Placental Fragment | 3 |
| | 3 |
| Retention of Secundines | |
| Retinitis | 2 |
| Retroflexion | 1 |
| wethollexion | The state of the s |
| Retroversion | 42 |
| Rheumstic Fever | 1 |
| Discount of the state of the st | 17 |
| Rheumatic Heart Disease | |
| Rhinitis | 18 |
| Rickets | 1 1 1 |
| TILONG OB | 1 |
| Rosacea | - |
| Rotation, insufficient, of Kidney | 1 |
| Rupture | 20 |
| rapoute | 15 |
| Salpingitis | |
| Salpingo-oophoritis | 13 |
| Sarcoma | 2 |
| Darcona | 7 |
| Scabies | 1 3 |
| Scald | 3 |
| Scar | 8 |
| Soal | 10 |
| Sclerosis | |
| Scoliosis | 2 |
| Senility | 3 |
| C Toint | 10 |
| Separation of Joint | 10 |
| | |

| 174 5 | Fremature birth |
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| and the same of th | |
| | Premature delivery |
| | Presentations |
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| 398 | Xejzev |
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| 4. | |
| | Proptosis of Eyebell |
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| .8 | Pyelonephritis |
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| | 0 |
|--|-----|
| Septicemia | 2 |
| Sequestrum | 5 |
| Severed Tendon | 11 |
| Serum Sickness | 3 |
| Shock | 5 |
| Silicosis | 2 |
| Sino-auricular Block | 1 |
| Sinus | 26 |
| Sinusitis | 78 |
| Skenitis | 2 |
| Spasm | 8 |
| Spermatocele | 1 |
| Spina bifida | 1 |
| Splanchnoptosis | 3 |
| Splenomegaly | 1 |
| Spondylolisthesis | ī |
| Sprain | 24 |
| Spur | 3 |
| | 1 |
| Staphyloma Status Thymo-Lymphaticus | i |
| | 11 |
| Steatoma | 19 |
| Stenosis | 3 |
| Sterility | 1 |
| Strain | 10 |
| Strangulation, due to Hernia | 2 |
| Streptococcus Sore Throat | |
| Stricture | 33 |
| Sun-burn | 1 |
| Supernumerary Regions | 3 |
| Synechia | 1 |
| Synovitis | 3 |
| Syphilis | 31 |
| Tabes dorsalis | 3 |
| Tabo-paresis | 1 |
| Talipes | 2 |
| Tear | 6 |
| Tenosynovitis | 2 |
| Teratoma | 2 |
| Term hirth | 398 |
| Term delivery, intra-partum death | 2 |
| Thrombo-angiitis obliterans | 1 |
| Thrombophlebitis | 6 |
| Thrombosed epiploic appendage of sigmoid | 1 |
| Thrombosis | 32 |
| Tonsillitis | 350 |
| Torsion | 1 |
| Torticollis | 1 |
| Toxemia of Pregnancy | 1 |
| Tracheitis | 4 |
| Trachoma | 2 |
| Trauma, unspecified | 3 |
| Trichinosis | 2 |
| Trichomonas Infection | 3 |
| Trichomonas infection | |
| | |

| | Septioemia atmostrae |
|---------|--|
| | |
| | |
| | Severed Tendon |
| | Serum Sickness |
| | State of Sta |
| | Silicosis |
| | Sino-auricular Block |
| | Sinus |
| | Sinusitis Structure Structure |
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| | Sterility villings |
| | STEEL OF STREET, STREE |
| | Strangulation, due to Herris stagnarta |
| | Streptococcus Sore Throat |
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| | Supernumerary Megions |
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| | Syphilis |
| 8 | Tabes dorsalis sifestob sedaT |
| | Tabo-paresis |
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| 55 | Tenosynovitis |
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| | Thrombo-angiltla obliterans |
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| | Toxemia of Pregnancy |
| | Trachetta |
| S . | Trachona |
| | Trausa, unspecified |
| 1114888 | Triobinosis sistemania |
| | Trichomonas Infection |
| | seer to a see a see see a see a mortal and miles described of the |
| | |

| Trigonitis | 5 |
|--------------------------------------|-----|
| Tuberculosis | 104 |
| Twins | 9 |
| Typhoid Fever | 2 |
| Ulcer | 91 |
| Undescended testicle | 8 |
| Undulant Fever | 2 |
| Unguis incarnatus | 5 |
| Upper Respiratory Infection, post-op | 1 |
| Ureteritis | 2 |
| Ureterocele | 1 7 |
| Urethritis | 3 |
| Urticaria | - |
| Uveitis | _ |
| Vaccination reaction, general | |
| Valvulitis | |
| Variocele | |
| Varicose Veins | |
| Verruca | |
| Vesiculitis | _ |
| Vincent's Angina | 165 |
| Wounds | 700 |

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| 8 | | | Bld. | Trigoni |
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| 3 | | | BLVL | LuciseV |
| S. | | | smrnma e' | Vincent |
| 165 | | | | |

SUMMARY OF CASES OF DEATH

| CASES REPORTED | 194 |
|---|-------------------|
| DIAGNOSES | |
| Abortion, septic, with septicemia | 1 1 |
| Adeno-carcinoma Cecum Colon, with embolism, pulmonary Lung, with metas. to pleura Prostate, with pneumonia, broncho Rectum, with shock, post-operative Sigmoid, with peritonitis, general | 1 1 1 1 1 1 1 1 1 |
| Sigmoid and Rectum Uterus, with adenocarcinomatosis Agranulocytosis, with pneumonia, hypostatic Anemia, secondary, with pneumonia, phpostatic Aneurysm, vascular, cerebral Aortic Insufficiency, syphilitic | 1 1 1 1 1 |
| Appendicitis Acute, with peritonitis | 1 1 1 1 1 2 |
| Arteriosclerosis, general With pneumonia, broncho With thrombosis, cerebral Arteriosclerotic Heart Disease With Decompensation With Nephritis With Nephrosclerosis | 1 2 2 |
| With Thrombosis, Coronary Asthma, bronchial, with pneumonia, broncho Bacteremia, streptococcus Bronchiectasis, with lepto-meningitis Bronchitis, purulent, with arteriosclerotic Heart Disease | 1 2 3 |
| Bundle Branch Block, with thromobosis, coronary Calculus Biliary | |
| Carcinoma Adrenal gland, with pneumonia, broncho Breast, with metas. to axilla with metas. to lung with metas. to spine Cervix, with metas. to abdomen | |

SUMMARY OF CASES OF DEATH

| | CASES REPORTED |
|-------|--|
| | The state of the s |
| | SGL Lanoitufitanī |
| | Non-institutional 68 |
| | * * * * * * * * * * * * * * * * * * * |
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| | PEDAMA ATA |
| | DIACNOSES |
| | |
| | |
| | Abortion, septic, with septicemia |
| | Abscess of lung and brain attend bns gnul To seeoada |
| | Additional and the same of the same and the |
| | " peritonsillar, with pneumonia, broncho "" |
| | Adeno-carcinoma |
| | |
| | Cooum |
| | Colon, with embolism, pulmonary nolod |
| | Commence from the first of |
| | Lung, with metes, to pleure |
| | Prostate, with pneumonia, broncho |
| | The state of the s |
| | Rectum, with shock, post-operative |
| | Sigmoid, with peritonitie, general |
| | The state of the s |
| | Signoid and Rectum |
| | Uterus, with adenocarcinomatosis |
| | and the second of the second o |
| | Agranulocytosis, with pneumonia, hypostatio |
| | Anemia, secondary, with pneumonia, phycatatic |
| | The state of the s |
| * | Aneurysa, vascular, cerebral |
| als. | Aortic Insufficiency, syphilitic |
| | |
| | Appendicitis |
| - Sec | Acute, with peritonities |
| | Gang. with embolism, coronary |
| | Control of the state of the sta |
| | Perf. with hemoorhage, intra-abdominal |
| 1. | Perf. with peritonitis |
| | TO TO ON DIRECT STORY OF THE ST |
| 10 | Chronic, with paralytic fleus, post-op |
| | with pneumonia, bronond |
| | Arteriosolerosis, general |
| | TOTAL STATE OF THE STATE OF ST |
| | ***** pneumonis, bronond odonord asinomuenq ditw |
| | With thrombosis, cerebral faidereo , alacdmornf nitw |
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| J. | With Decompensation moltageognosed dilw |
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| | With Nephritis stringen diw |
| | With Nephrosolerosis sisorelosorageM nitW |
| | TO COMPANY OF THE PROPERTY OF |
| | |
| | With Thrombosis, Coronary broncho |
| | Bacteremia, streptococcus |
| | The state of the s |
| | Bronchiectasis, with Tepto-Meninglia |
| * | Bronchitie, purulent, with erterioselerotic Heart |
| | promise a second second selection of the second sec |
| | ···· Disease ···· |
| | Bundle Branch Block, with thromobosis, coronary |
| | |
| | Calculus |
| | BILISTY VIRILIA |
| | TOPO PARENTO DE PROGRAMANTA ALLE CONTRACTOR |
| | Ureteral, with thrombosis, coronary |
| | Care inona |
| | Adrenal gland, with pneumonis, broncho |
| r . | The state of the s |
| | Breast, with metas, to axilla |
| | ************************************** |
| | |
| | " with metas, to spine" |
| | Cervix, with metas, to abdonem |

| Carcinoma | |
|---|-----------------|
| Colon, with embolism, pulmonary | 1 |
| Commun Duct, with Congestion, pulmonary | |
| Esophagus, with metas. to liver | 1 |
| Liver, with metas. to lymphnodes | 1 |
| Lung, with stenosis of Bronchus | 1 |
| Ovary, with carcinomatosis | 1 |
| ", with metas. to lung | 1 |
| Pancreas | 1 |
| Pleura | 1 |
| Pylorus | 7 |
| With metas., general | 1 |
| With metas. to liver | 1 1 1 1 1 1 1 1 |
| With pneumonia, hypostatic | 1 |
| Rectum and Sigmoid | 1 |
| Stomach, with metas | 1 |
| with metas. to pleura | 1 |
| Transverse Colon | ī |
| Carcinoma, secondary | |
| Intextines and Vertebrae | 1 |
| Lung, with pleural effusion | 1 1 2 1 1 |
| Cholangitis, with Septicemia, B. coli | 1 |
| Cholecystitis, chronic, with abscess to liver Cirrhosis of Liver | 2 |
| Compression, acute, of cord | 1 |
| Cystadenoma, ovaries, with metas., peritoneal | 1 |
| Diabetes, mellitus | - |
| With Arteriosclerosis, general | 2 |
| With Carbuncle | 1 4 |
| With Coma With Gangrene and pneumonia | |
| With hepatitis, acute | 1 |
| Embolism, cerebral | 1 1 1 1 |
| Encephalitis. acute | - |
| hemorrhagic | 1 1 1 |
| Endocarditis, subacute, bacterial | 1 |
| Endometritis, septic, with infarcts, pulmonary | _ |
| Endothelioma Pleural | 2 |
| Lymphnodes, cervical, with metas, to brain | 1 |
| Entoritie acute with obstruction. intestinal | 1 |
| Fibroms peritoneal (retroverted) With obstruction | 1 |
| duodenal, & acute dilatation of stomach | 7 |
| Fracture general | 1 |
| Femur, with arteriosclerosis, general " with embolism, pulmonary | 1 |
| Fibs, with puncture of lung & pneumonia, lobar. | 1 1 1 5 2 1 |
| Skull and Verbebrae | 1 |
| Clomorulo-Nephritis, acute | 1 5 |
| Hemorrhage cerebral (cause?) | 5 |
| Arterioscierotic | 1 |
| Subarachnoid | |

| th embolism, pulmonary 1 | Colon, wi |
|--|--------------------|
| 1 with Congestion, pulmonery 1 | |
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| 1 stenosis of Bronohus | |
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| with pneumonia, broncho 1 | |
| colon I | |
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| I pleural effusion inclaura isruelq | |
| I Septioenia, E. coli | |
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| ovaries, with metes., peritonesl 1 | |
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| th embolism, pulmonary | the mediate |
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| th arteriosclerosis, general th embolism, pulmonary puncture of lung & pneumonis, lobar. the properties acute the puncture of lung & pneumonis, lobar. contains acute defended for the contains acute | |
| S olforeleachrefra | |
| dbarachmoid 1 | |
| | |

| Hepatitis, toxic | 1 |
|--|---------|
| Hernia, ventral, incarcerated, with embolism | 7 |
| cerebral | 1 |
| Hypernephroma of Kidney | |
| Hypertensive Cardio-Vascular Disease | 1 1 1 1 |
| With hemorrhage, cerebral | 7 |
| With Nephrosclerosis | 1 |
| With Fneumonia, broncho | 1 |
| With Thrombosis, pulmonary | i |
| Hypertensive Vascular Disease | - |
| With Bronchitis, streptococcus | 1 |
| With Hemorrhage, cerebral | 3 |
| Hypertrophy of Prostate | |
| With hemorrhage, cerebral | 1 |
| With hemorrhage, secondary | 1 |
| With pneumonia, broncho | 1 |
| With uremia | 2 |
| Mastoiditis, streptococcus, with Septicemia | 1 |
| Meningitis, meningococcus | 1 |
| Neoplasm, unspecified | |
| Brain | 1 |
| Intra-abdominal, with Arteriosclerotic | |
| Heart Dis | 1 |
| New-born | |
| With Birth Trauma | 1 |
| With malformation, congenital, of heart |] |
| With prematurity | 6 |
| " & atelectasis, primary | 1 |
| " & status thymo-lymphaticus | 1 |
| Obstruction, intestinal | 7 |
| With peritonitis |] |
| With pneumonia, broncho | 1 |
| Occlusion, coronary |] |
| With infarction |] |
| Otitis media, chr., with pneumonia, lobar |] |
| Pancarditis, rheumatic, with pneumonia, broncho. | j |
| Paralytic ileus, with embolism, coronary |] |
| Paratyphoid Fever |] |
| Paronychia, traumatic, with bacteremia |] |
| Phlebitis, femoral, with uremia |] |
| Pneumonia | |
| Broncho | 9 |
| with Septicemia | |
| Lobar | 6 |
| Pneumococcus | |
| Pyonephrosis | |
| With Calculus |] |
| With Uremia |] |
| Rheumatic Heart Disease | |
| With decompensation | |
| With dilatation, acute, of Heart | |
| | |

| | Hepatitas toxic |
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| | . see a consequence and a consequence of the second service of the |
| | Mernie, ventral, incercerated, with emboliam |
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| | derebre |
| | Hypermanhrous of Widney |
| | Hypernephrone of Kidney |
| | Hypertensive Cardio-Vascular Disease |
| 1000 | |
| I | With hemorrhage, cerebral |
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| | With Wephritis, chronic blmordo asitirnqeW milW |
| | With Meghrosolorosis associated with |
| | sees sees sees as a see a disolotosoluden man |
| | With Enguments, bronche |
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| | With Thrombosis, pulmonary |
| | Hypertensive Vascular Disease |
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| | With Bronchitis, streptococcus |
| | A R R R R R R R R R R R R R R R R R R R |
| | With Hemorrhage, cereoral |
| | the state and the state of the |
| | Hypertrophy of Prostate |
| | . Involution and description of the |
| | With hemorrhage, cerebral |
| | With hemorrhage, secondary |
| | · · · · · · · · · · · · · · · · · · · |
| | With pneumonin, broncho |
| | and more state of the S W |
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| | Mastoiditis, streptococcus, with Septicemia |
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| | Meningitis, meningococcus aucococcuinem estrignineM |
| | to a little and a second and a |
| | Neoplasm; unspecified |
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| | New-born |
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| | With malformation, congenital, of heart |
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| TI | Chstruction, intestinal |
| TI | Chstruction, intestinal |
| T II | Obstruction, intestinal With peritonitis |
| T II | Obstruction, intestinal With peritonitis |
| TI | Obstruction, intestinal With peritonitis |
| TIL TIL | Obstruction, intestinal With peritonitis |
| TIL TIL | Obstruction, intestinal With peritonitis |
| T II | Obstruction, intestinal With peritoning broncho |
| TIL TIL | Obstruction, intestinal With peritoning broncho |
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| THETHURAN IN | Chstruction, intestinal With peritonitis With preumonin, broncho Occlusion, coronary With infarction Cottic media, chr., with pneumonia, lobar Pancreatitis, rheumatic, with pneumonia, broncho Paralytic ileus, with cabolian, coronary Peralytic ileus, the cabolian, coronary Peralytic ileus, the cabolian, coronary Peralytic ileus, with cabolian, coronary Phichitis, femoral, with uremia |
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| Rupture of Bladder, with peritonitis | 1 |
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| Separation of symphysis pubis, with rupture | |
| of Bladder | 1 |
| Sinus, rectal, with anemia, secondary | 1 |
| Stricture, urethral, with uremia | 1 1 |
| Tabes dorsalis, with cardio-vascular lesions | 1 |
| Term delivery, intra-partum death, with | |
| embolism, pulm | 1 |
| Thrombosis | |
| Cerebral | 1 |
| Coronary | 3 |
| Tuberculosis | |
| Intestinal | 1 |
| Pulmonary | 1 |
| With embolism, ccrebral | 1 |
| Ulcer | |
| Duodenal, with pneumonia, broncho | 1 |
| " with peritonitis, post-op | 1 |
| Gastric (perf.) | |
| with embolism, coronary | 1 |
| with pneumonia, lobar | 1 |
| Pylorus, with pneumonia, broncho | 2 |
| | 201 |
| | 194 |

| 1 | Rupture of Biedder, with peritonitie |
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| | Separation of symphysis pubis, with rupture of Bledder |
| | Sinus, rectal, with amenda, secondary |
| | Stricture, urethrol, with urenia |
| I | Tabes dorsalis, with cardio-vesquiar lesions |
| | Term delivery, intra-partum desth, with |
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